

Chemist & Druggist

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OCTOBER 5 1974

THE NEWSWEEKLY FOR PHARMACY

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lacking in
pharmacies'

Do chemists
care about
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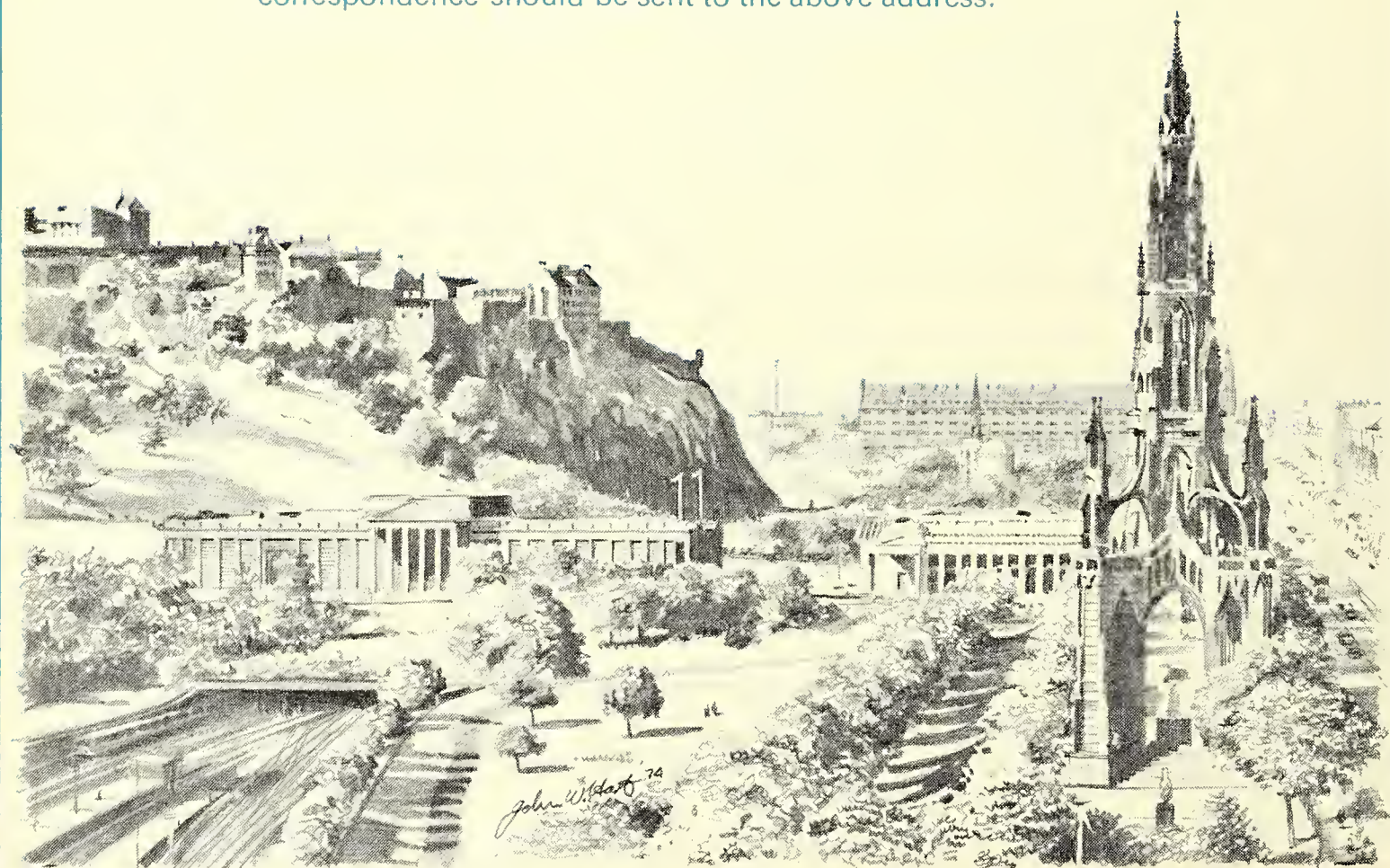
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The newsweekly for pharmacy
5 October 1974 Vol. 202 No. 4933
116th year of publication

Contents

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K. F. Preece, BSc, MPS
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Official organ of the Pharmaceutical Society of
Ireland and of the Pharmaceutical Society of
Northern Ireland



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Comment <input type="checkbox"/> Supervision	463
Sales in pharmacies not supervised, says survey	464
Dangers of "planned" pharmacy	464
Will chemists support NHS sanctions?	465
Pharmacists attacked by doctors' journal	465
ASA rejects advertisement complaints	466
Poisons Rules changes	466
The Xrayser column: Letters	470
Wilkinson Sword enter sunglass market	481
A new baby milk from whey	484
Chemists not seen to be caring about patients	485
Isophane insulin supplies in Northern Ireland	488
Sterling-Winthrop plan for more paracetamol	489
Oils market was upset by "holding"	490

Appointments	490	New Products	473
Bonus Offers	480	News in Brief	470
Coming Events	491	On TV Next Week	480
Company News	489	Postscripts	463
Deaths	470	Prescription Specialities	474
Letters	486	Trade News	478
Market News	490	Classified Advertisements	492

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021-744 4427
North East: Permanent House, The Headrow, Leeds LS1 8DF
0532 452841
Scottish: 74 Drymen Road, Bearsden, Glasgow 041-942 2315
North West: 491 Chester Road, Old Trafford, Manchester M16 9HF
061-872 5151
West Country and South Wales: 10 Badminton Road, Downend,
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...the pharmacist's concern for the
patient appreciated, asks Mr C. C. B.
Stevens, the Society's president, this
week (see p 485)

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When you introduce the babymilk, you have a lot

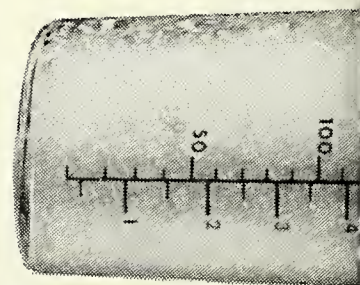
True, Premium does come at a premium price. But, then, it is the most technically advanced babymilk now available. Closer than any other babymilk to a mother's own milk. Closer to the natural food which gives a baby the best start in life.

Although it begins as fresh cows' milk, the way Premium is modified makes it unique.

To align it with breast milk, the protein in Premium is adjusted to corresponding levels, while the casein to soluble protein ratio is similarly based.

The solute load is kept low. Sodium and potassium levels are reduced. The calcium and phosphorus ratio is regulated to provide satisfactory absorption.

Vitamin levels follow the published nutritional requirements of babies. And lactose is the sole carbohydrate.



most expensive of explaining to do.

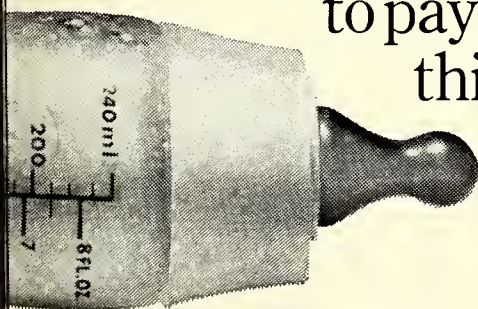
Then there are the fats, specially blended to match the fatty acid pattern so perfectly set by mother's milk.

It takes no time at all to mix Premium into the complete and naturally balanced food it is. A food that's easy to digest, that leaves babies well satisfied.

Premium helps a baby to grow sturdily, to gain weight naturally and to develop just like a breast-fed baby. For mothers who are not breast feeding, here is the best possible food they can give, when a special diet isn't prescribed.

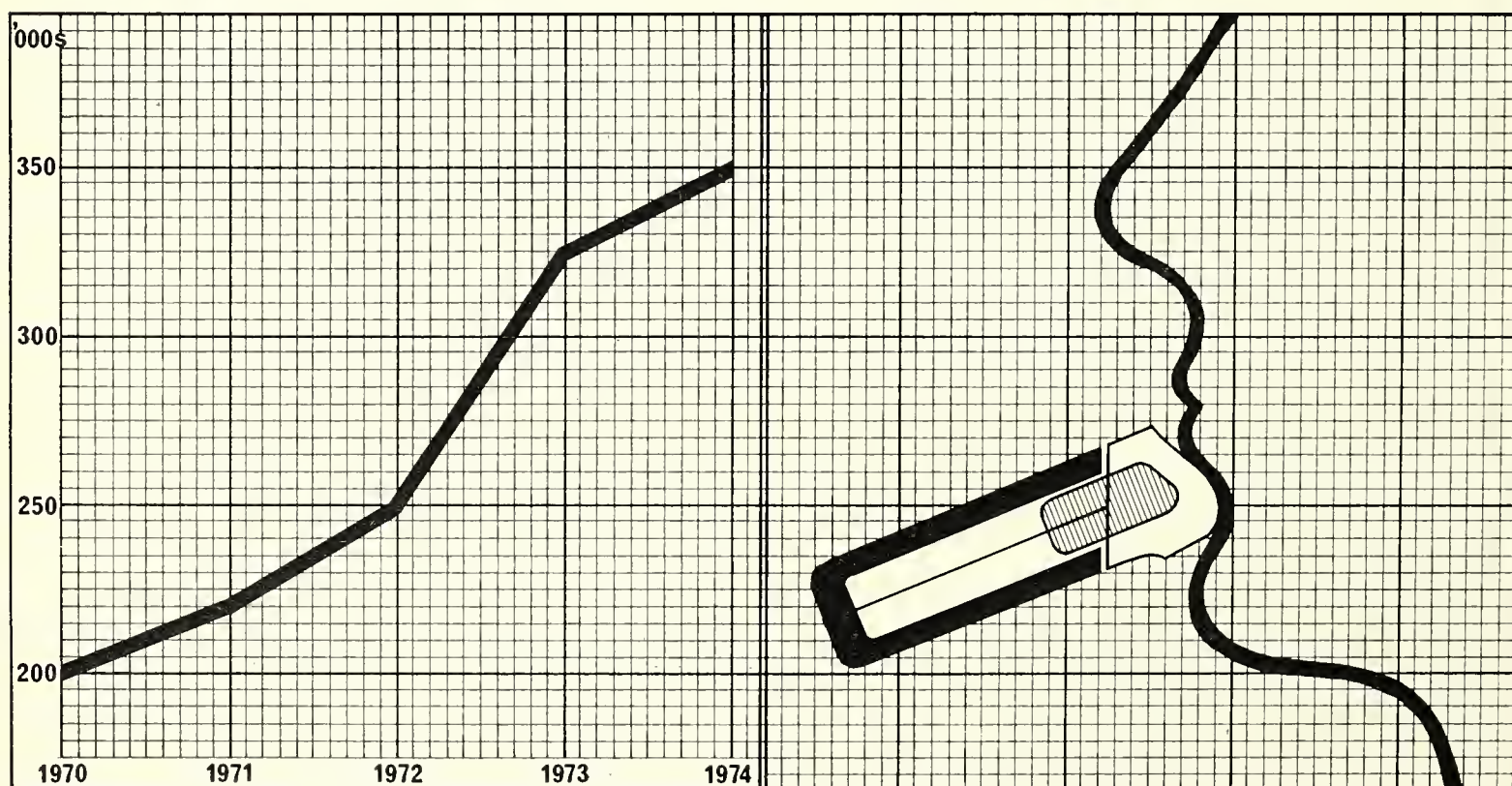
Full colour spreads are to appear in the mother-and-baby press explaining what new Premium means. And why it's the most expensive babymilk there is.

We know that many mothers will be prepared to pay the price. Will you help us to make this important new product available to them?



**Cow
& Gate**

In a growing market, Philips Foil Shaver has the best selling angle.



The national sales-curve

For you as a shrewd businessman, this chart has significance. The market for foil-head shavers has shown an increase of 75% over the past four years. It's worth bearing in mind when you're deciding which shavers to keep in stock. Now read on.

Powerful T.V. advertising this Autumn

The Philips Foil Shaver deserves a tough, hard selling commercial, and that's what it's getting. In London, Scotland and the South, this commercial will reach 80% of all men in homes with ITV. With an average of 5 opportunities to see, it adds up to 29,580,000 impacts.

Philips Foil Shaver £15.31, Suggested selling price inc. VAT.

The Philips shaving-angle

As giants in the electric-shaver business, Philips are naturally the best-prepared to help you profit by this development. Only Philips has the angled-head foil shaver, the XTR 7. After a number of years on the drawing board, it's been successfully tried and proven.

Support from Press too!

Philips ads in the national newspapers will also feature the Foil Shaver. So stock up now to meet demand for the Philips Foil Shaver—it has the best selling angle on the market.



PHILIPS

Simply years ahead

Professional News

Pharmaceutical Society of Ireland

Council asks pharmacists to report drug faults to Drugs Advisory Board

The Pharmaceutical Society of Ireland are advising pharmacists to report any defects, faults or failure in drugs which may come to their notice direct to the National Drugs Advisory Board. This is at the Board's request and pharmacists are asked also to encourage their customers to report any adverse effects of medicines to their medical or dental practitioners.

In a letter to the registrar, Mr J. G. Coleman, and read to the Society's September Council meeting, the secretary of the NDAB expressed gratitude for the response by pharmacists to a previous request for information on drug reactions. Data of that kind was invaluable, since it provided the basis for having a situation investigated and remedied with the least possible delay. A second communication was received from Dr A. Scott, medical director of the Board, intimating that she had received reports that isoprenaline inhalers were being supplied over-the-counter in some pharmacies. The president, Mr R. J. Semple, said that while isoprenaline was not a scheduled preparation, pharmacists should exercise great caution when they receive requests for inhalers containing the drug. Ideally, isoprenaline inhalers should be used only on the advice of a doctor. Mr Semple added that the National Drugs Advisory Board would always find the pharmacists were anxious to co-operate in matters relating to public health.

Finance Minister's view

A letter was received from Miss Mary Morrissey, private secretary to the Minister for Finance, expressing the views of the Minister, Mr Richie Ryan, TD, on representations made by the Council on the value-added tax problem. The letter read: "The Minister for Finance, Mr Richie Ryan, TD, has asked me to refer again to your letter of 2 July, 1974, regarding difficulties encountered by members of the pharmaceutical profession in the operation of the value-added tax (VAT). The Minister has carefully considered your Society's representations but he regrets that he is unable to agree to the introduction of special arrangements as requested. At the meeting with officials to which your letter refers, your Society's representatives suggested that the collection of VAT be pushed back to wholesale or manufacturing level. Apart from the fact that such action would be out of line with our EEC commitments, there are a number of other objections to it. As the tax base at wholesale or manufacturing level would be smaller than at retail level the rates of tax would have to be higher to yield

the same revenue. Also, for those operating at retail level, tax would be part of the cost price of goods on which mark-up would normally be calculated. Thus prices to customers would increase.

"The VAT distinction between oral and non-oral medicines was also mentioned as a difficulty. The reduction of the rate of VAT on food was done for major social reasons of which you will be aware. That concession was also applied to oral medicines so as to avoid problems which might otherwise have arisen of distinguishing, for tax purposes, between food and oral medicines. However, further extension of zero-rating to include non-oral medicines is not regarded as justified. Furthermore, there is the point that EEC obligations constrain the scope for zero-rating.

"The needs of pharmacists were taken into account in the special scheme which enables pharmacists to account for VAT on a cash receipts basis. The arrangements decided upon, in that respect, are regarded as being the fairest practicable. In conclusion I might mention that VAT is essentially a broad-based tax on the consumption of the general public. It follows that special arrangements must be avoided unless the purpose of the tax is to be eroded over a period of time (one concession leading to another) and its operation rendered unduly complicated."

Mr M. F. Walsh described the communication as "wholly unsatisfactory." The Council's objections to VAT were based on the idea that the responsibilities of pharmacists and their professional activities generally must take precedence over commercial or financial matters. Mr R. J. Power reported that the Pharmaceutical Union was arranging a series of meetings and would not accept the present "intolerable" situation. It was decided to advise the Minister that the strain imposed by the VAT system on the practice of pharmacy was unacceptable and should be eased as a matter of priority.

Out-of-hours dispensing

Mrs Phyllis Huet, honorary secretary, Joint Committee of Women's Societies and Social Workers, wrote that the problem of obtaining medicines during hours when pharmacies were closed was discussed at a recent meeting of the organisation. They noted that in some areas the chemist who closed on Sunday or a Bank Holiday left a notice saying where a colleague was on duty. Could this system apply in all areas and could it be extended to facilitate patients who are given a prescription late at night, she asked.

Mr M. Shannon expressed the view that the problem was more apparent than

real and that the main difficulty was lack of communication. Most pharmacies displayed notices informing the public how to contact a pharmacist for service after normal opening hours. Mr Walsh said he would like to see more formal arrangements made for rota and late night services. A proper system would make life easier for everybody. It was decided to refer the request to the Irish Pharmaceutical Union for consideration.

Members expressed keen disappointment at the decision of the Minister for Posts and Telegraphs not to include in his programme for 1975 a commemorative stamp to mark the 100th anniversary of the establishment of the Pharmaceutical Society of Ireland. Mr D. F. MacMahon, on behalf of the Minister, wrote saying that no such stamp would be issued, adding that the number of special stamp issues possible in any one year was limited "and consequently many worthy subjects have to be excluded." On a proposal by Mr McGuinn it was decided to form a sub-committee to examine the feasibility of printing a private commemorative stamp or seal.

The Leitrim Pharmacists' Association informed the Council that they were agreeable to the proposal that Mr C. M. Browne, MPSI, should continue to represent pharmaceutical interests on the North Western Health Board, even though he had moved his practice to a town just outside the region. It was recommended that other county associations in the region should be asked for their views.

Unwanted medicines

The president reported on his representations to the Department of Health and the Eastern Health Board to arrange immediately for the collection of boxes of unwanted medicines from pharmacies participating in the recent "unused drugs are dangerous" campaign. In view of the negative response he proposed to write to the Minister for Health personally to arrange for the collection of the boxes.

The senior inspector reported that there had been an increase in burglaries at pharmacies in recent months, drugs being the principal objective of the thieves. The president commented that pharmacists would need to re-appraise their security arrangements and as a first step should reduce stocks to the minimum. Also arising out of the inspector's report, pharmacists were advised to close their premises during the lunch hour unless there was a qualified person on duty.

Mr M. F. Walsh submitted a further report from the committee investigating professional fees for private prescriptions. Some additional work remained to be done before he could publish final figures.

Dr W. E. Boles, commenting on the FIP General Assembly and Congress of Pharmaceutical Sciences held recently in Rome, said the Irish participants had observed the organisational side closely and had absorbed a good deal of information which would be of benefit to them in preparing for the 1975 Congress in Dublin. A large number of inquiries were received at the Irish information desk, which was situated in a prominent position in the reception area of the

Continued overleaf

Union is refused information on poison control

The National Drugs' Advisory Board has ruled that information concerning poison control could not be given to the Irish Pharmaceutical Union, reported the group secretary, Mr B. R. Smith, to the Union's September Executive meeting. It was agreed that such information should be sought by the Pharmaceutical Society of Ireland, and the feeling was expressed that this should be available to all pharmacists — especially for the Index List.

The recommendation to the National Prices Commission for permission to increase the professional fee to £0.60 for private prescriptions was being dealt with by the Union's Executive, it was reported. An interview was being sought with the Minister for Industry and Commerce regarding profit control.

A report on a meeting with officials of the Revenue Commission regarding the possibility of setting up a joint committee to advise on VAT classification regarding preparations in the Index List was submitted. It was stated that no final decision had been arrived at.

After Mr R. T. Phelan had reported that "prescription only" items were being sold by some pharmacists without prescriptions it was agreed that a circular be sent to all members clarifying the position.

New officers

The newly-elected Community Pharmacists' Group Committee of the Union has appointed Mr R. C. (Colm) O'Higgins, South William St, Dublin, chairman; Mr

John Holly, Market St, Ardee, co Louth, vice chairman; and Mr A. O'Shea, Blackpool Bridge, Cork, treasurer. Nominated to the National Executive were: Mr J. P. Burke, Mr A. Gleeson, Mr T. R. Miller, and Mr. R. C. O'Higgins.

Appointed to the Index Price List Committee were: Messrs J. Burke, A. J. Coleman, T. Lawlor, T. R. Miller and R. C. O'Higgins. The Finance Committee will consist of Messrs A. O'Shea (chairman), J. J. Holly, T. Lawlor, T. R. Miller and R. C. O'Higgins. General Policy Sub-Committee appointees were: Messrs J. P. Burke (chairman), M. Broderick, J. Gannon, T. O'Malley, F. Reen, R. T. Phelan, S. Power, A. P. Toher, R. J. Power, J. Holly, and A. O'Shea.

Pharmaceutical Assistants examination successes

The following were successful in the September examination for the qualification of Pharmaceutical Assistant:—

Ahern, Vivienne Catherine Claire; Brennan, Mary Agnes; Clancy, Mary Brigid; Connolly, Nuala Mary; Cuddy, Catherine Elizabeth; Fanning, Margaret Mary; Finnemore, Eileen Patricia; Gilligan, Bridget Mary Margaret; Kiely, Joan Pauline Therese; King, Helen Maria; Larkin, Frances Mary; McLaughlin, Mary Colette; Murray, Margaret Mary; O'Sullivan, Hannah Mary Majella; Ryder, Michael Peter; Tormey, Mary Margaret; Treacy, Anne.

Council report

Continued from overleaf

Congress Hall. He thanked the Irish Ambassador to Italy for providing a reception in his home for delegates; the Irish Tourist Board for a great deal of assistance; Aer Lingus who had sent hostesses to help at the stand; the Italian organising committee who had been so co-operative. Dr Boles paid a warm tribute to the Irish delegates, who had worked so hard to ensure that the Dublin Congress would be worthy of Irish pharmacy. He was happy to say that the general reaction to Dublin as the Congress venue was excellent.

The registrar reported the deaths of Mary Casserley, MPSI, Assistant; John Joseph Tierney, LPSI; George Julius Fitzgerald, LPSI; and Walter Cecil Tate, MPSI.

Register changes

The following were restored to the registers of the Society: Mrs Elizabeth Daly (nee Maguire), LPSI, Mrs Catherine Gleeson (nee McCarthy), LPSI, Dr Michael G. Kieran, LPSI, Miss Joan O'Leary, LPSI, and Mrs Barbara Mary Hale, Assistant. The following were granted change of name in the registers, marriage certificates having been submitted: Mrs Deirdre Colgan (nee O'Donnell), Assistant, and Mrs Veronica Roache (nee Fehily), LPSI.

The following addresses were changed in the registers of the Society: Mrs Teresa Burke, MPSI, and Mr John Burke, MPSI, to Digges Pharmacy, 69 Ranelagh, Dublin 6; Mrs Bridget F. Kelly, LPSI, to 209 Millbrook Lawns, Tallaght; Mr J. G. Coleman (registrar) to 2 St Thomas' Meade, Mount Merrion, co Dublin; Mrs Joan Malone, Assistant, to Kilcree, Ovens, co Cork. The following were elected to membership: Eleanor M. Browne, Matthew M. Browne, Gerard Cassidy, Joseph M. Crowley, Mary Mulvihill and James Pettit.

Waterford Congress programme

"Medicines and the public welfare" is the title of the Irish Pharmaceutical Congress at Waterford from next Sunday. The programme is as follows:

Sunday, October 6

4-7 pm Arrival of delegates

6.30 pm Sherry reception

9.30 pm Congress opening by the Mayor of Waterford

10 pm Congress Club: entertainment, dancing

Monday, October 7

10 am Ecumenical service

11 am "The pharmaceutical industry in Ireland—an area of remarkable growth": V. Skipper Nielsen, BPharm, MSc, E. J. Pilcher, MPS, J. Fitzgibbon, MPSI

2.30 pm "Some problems with IV fluids": Ingrid L. I. Hook, BPharm, MSc; "Drug dilemmas": Professor P. F. D'Arcy, PhD, BPharm, FPS

4.30 pm "Modern concepts in infant nutrition": Professor R. G. G. Barry, MD, MRCP(Lond), DCh

8.15 pm Annual meeting of the Pharmaceutical Society of Ireland

Tuesday, October 8

10 am "The pharmacy graduate—the road ahead": M. Whelan, BSc(Pharm), MPSI, Bridget M. T. Quigley BSc(Pharm), MPSI, D. Garahy, BSc(Pharm), MPSI

11.15 am "Two evils of our time": (Pharm), MPSI, D. Garahy, BSc(Pharm), MPSI

11.15 am "Two evils of our time": Dr D. J. Lane-O'Kelly on "Alcoholism and its treatment"; C. S. O'Connor, MA, MSc, FPSI on "Misuse of drugs"

2.30 pm "Pharmacy in the old world and the new": Dr G. F. Archambault, PharmD, LLD(USA), Dr M. Nedergaard, BPharm (Denmark) 5 pm Discussion

8.30 pm "Trends in the practice of pharmacy": J. P. Burke, FPSI, T. A. McGuinn, MPSI, R. Miller, FPSI

Wednesday, October 9

10 am "Pharmacy—a comparative study in general practice": J. C. Bloomfield,

OBE, FPS, JP

11.30 am "The Irish Pharmaceutical Union progress report": G. Ledwith, BA

7.30 pm Sherry reception

8 pm Banquet

SOCIAL PROGRAMME

Monday, October 7

11 am Visit to Waterford Glass Ltd

12.30 pm Visit to Curraghmore Estate (Shellhouse and gardens)

8.30 pm Fashion show, bridge

Tuesday, October 8

10.30 am Visit to Majestic Hotel, Tramore; swimming in heated pool

12.30 pm River cruise or ladies golf competition

8.30 pm Bridge

Wednesday, October 9

10.30 am River cruise or coach tour of Gaultier Country or cookery demonstration at Ardree Hotel by Manfred Schick

2 pm Men's golf competition, bridge, conducted walking tour of "Old Waterford"

Comment

Supervision

The findings of the survey into supervision of "restricted" medicines sales in pharmacies by the National Federation of Consumer groups (p464) were entirely predictable, that is, pharmacists do not intervene personally in each and every transaction and in the vast majority of cases see no reason to either prevent the sale or add to the warnings on the product. But that is not to say the sale has not been "supervised".

The problem is that consumer groups and the profession (the latter together with the law) speak different languages on this question. Supervision has to be seen to be believed, say the consumers; the pharmacist must be aware of the sale and capable of intervention, says the profession. Whether the survey tested the pharmacists' "awareness" of the sales is extremely doubtful, and we also doubt whether the Federation's interpretation of the level of supervision is what many of its members would seek for themselves as pharmacy customers. (Many better-educated people resent interference in their choice, as all retail pharmacists can testify, and "intervention" becomes appropriate only when it is obvious the customer is mishandling the product).

The most hopeful outcome of these surveys is that they may get legislators, consumer interests and the profession considering together just how much supervision is required. The trend, from the consumer point of view, seems to be towards greater control by the pharmacist—something the profession will welcome, because acceptance of the principle must lead to immediate recognition that it is medicines in general that require control, not merely listed "poisons".

But even "consumer" opinions differ on what is required by way of supervision at point-of-sale. At last weekend's South-east Regional conference (p485), Miss Claire Rayner, a medical journalist, said there should be a "consultant" pharmacist in each pharmacy someone having no commercial interest in the business. He would be more able to give unbiased advice without considering the need to sell a medicine, she

believed. What rubbish! To make such a suggestion shows total lack of understanding of the meaning of "profession"—or accuses pharmacists of failing to behave as members of a profession. Does Miss Rayner accuse doctors of giving patients a week off work to earn a certification fee, dentists of extracting sound teeth, solicitors of advising suicidal litigation? Professions have to put the interests of their clients above their own financial interests and the rule applies no less to pharmacy.

Many customers have had the experience of being refused a medicine by a pharmacist, of being referred to a doctor or advised of a more appropriate, perhaps less expensive treatment. Those who have not,—like the Federation's representatives—have perhaps never actually sought advice. Certainly an obviously intelligent customer who knows exactly what she wants is unlikely to be pounced upon by a pharmacist intent on showing up her ignorance—unless that ignorance looks like leading her into danger!

We suggest that the pharmacist's advice is not dictated by the need to make a sale, but we are sure the profession would jump at the chance of putting into operation the obvious corollary to Miss Rayner's "consultant" proposal—that the consultant must be paid a fee or a salary for his *advice*. Will Miss Rayner be first in the queue to pay a guinea for advice instead of 50p for medicine plus the same advice?

The problem with any lay intervention in professional practice is that few of those involved take the trouble to find out the whys and wherefors of the existing principles. Perhaps it is pharmacy's own fault that there are so many well-intentioned people who misunderstand it, but an understanding must be sought. There are those who would wish to exploit any deficiency in the pharmacists' professionalism as a means of undermining his claims to guardianship of medicines distribution, and it is as well to heed the warning signs. Patients have more to fear from pharmacists losing control than pharmacists have from making the public more aware of the control it already exercises.

Post Scripts

Grants to Bath University team

The Department of Health has given a £6,700 grant to a joint Bath University and Hospital research team which is investigating the interactions between drugs, preservative materials used in ophthalmic medication and plastic contact lenses.

The team—Professor D. Norton, Dr D. Davies and Mr B. Meakin of the University's School of Pharmacy, together with Mr P. Jones, consultant ophthalmo-

logist at the Bath Royal United Hospital—have now received a total of £50,000 from different sources over the past few years. It is to be used to finance a detailed evaluation of the properties of 40 different preparations which are sold as contact lens wetting and cleaning solutions. Additional funds are still required, however, to support work on long term projects.

Proved at last

An honours student in statistics has proved that doctors' handwriting is worse than that of other people, according to the Australian Pharmacy Guild's magazine *Contact*. The student, Heather Goldsmith, surveyed 700 adults, and discovered that while most people had eight illegible letters in the alphabet, six doctors man-

aged to form only five or fewer characters legibly!

Miss Goldsmith was said to be "aghast" at the result, because she had undertaken the survey to prove to a friend that doctors' handwriting was not as bad as was generally made out. Few pharmacists would be surprised however.

Electrician's pharmacy in Africa

An African qualified-electrician opened a pharmacy to try to supplement his income because he had a big family, noted an issue of "Awake," the Jehovah Witnesses' magazine. The unsigned article was on Kisangani, the city at one time known as Stanleyville, in the middle of the vast central African rain forest. The writer was commenting on the African tendency for large families.

'Supervision' lacking in pharmacies

"Take your medicine at your own risk" — that is the warning issued to the public this week by the National Federation of Consumer Groups, following two nationwide surveys which showed there is little qualified supervision of sales in pharmacies. They have drawn the attention of the Secretary of State to "the serious lack of control" and call for "enforcement".

As an example, the Federation quotes 55 attempts to purchase medicines whose sale is restricted to pharmacies (Codis and Gee's linctus were included). In only one case was a sale refused — because the pharmacist was at lunch — and only one assistant called the pharmacist to assist her. "In every other instance there was no recourse to the qualified pharmacist and in fact there was no difference between these purchases and any other. At no time was any advice volunteered on the use of the medicines."

In the second survey, over 700 questionnaires revealed that the vast majority of people buy their "home" medicines from chemists and that they receive little or no advice on use. A Federation spokesman said, in relation to the approach to the Secretary of State: "It would be a pity if so many useful products had to be made prescription-only, simply because retail pharmacists are not carrying out part of their duties. We believe that the right machinery exists but must be made to work".

The Federation is pressing for the enforcement of existing regulations by local authorities, improved labelling of drugs, less accessibility to "restricted" medicines at point-of-sale, and greater consultation with consumer bodies before further legislation covering the sale of medicines is proposed.

The spokesman told *C&D* that no advice was sought at time of purchase in the survey — it was awaited.

Complaints

Mrs M. Haynes, who analysed the questionnaires, told *C&D* that the survey was carried out following complaints that customers were being refused service because no pharmacist was on the premises.

She said the interviewers in the first survey knew whether or not they were speaking to the pharmacist because after the purchase they were told to ask for the pharmacist as they wanted to know if the medicine was suitable for children.

She gave the following results: The second survey revealed that 88.7 per cent of people who returned questionnaires bought their last medicines purchases at pharmacies, even though 16.5 per cent lived between one and three miles from the nearest pharmacy; 41 per cent lived within one quarter mile and 78.3 per cent

lived less than one mile from the nearest pharmacy.

One tenth said they used a pharmacy every week, 37 per cent said every month, 52 per cent less than every month. Over half the sample were women over 35. Almost half bought analgesics and about one quarter bought cough mixtures and cold treatments.

When asked whether they would like advice on their purchases, 16.7 per cent said they would always like advice, 73.9 per cent said they would sometimes like advice and nearly 10 per cent said they did not need advice, but many of this group had medical connections already. No advice was offered in 88.5 per cent of purchases and when advice was given it was occasionally sought first by the customer. (Comment p463).

'Dynamic' market for male deodorants

The market for male deodorants has become the most dynamic of all toiletry sales in recent years, according to a survey published this week.

Whereas male usage was only 27 per cent five years ago, it is now 50 per cent, says the report, published by the research

organisation, Mintel, Davis House, High Street, Croydon. Some 12 per cent of men said they like to treat their skin with an antiperspirant twice a day and 25 per cent at least once a day, making a total of 64 per cent for the daily users. This compares with 89 per cent for women.

On aftershave Mintel notes that after a long, slow period of development this market is now taking-off. Sales of aftershave products this year are expected to reach some £12m, almost double what they were three years ago. Although previously sales were concentrated in the Christmas period, the market is now developing on an all-the-year round basis, says the report.

Women are the main buyers of aftershave and deodorant products for men.

Call for more publicity for shortage of pharmacists

The public's attention should be drawn to the critical shortage of pharmacists in the hospital service because of bad conditions and bad salaries, writes Aileen M. Edwards, principal pharmacist, Kingston Hospital, Surrey in this week's *Radio Times*.

She was praising "The Philpott File" on September 3 which showed how a London teaching hospital operated and indicated the dissatisfaction with salaries and conditions under which NHS staff work. The public often hear about shortage of nursing staff, technicians, radiographers etc, she says.

"We wonder, however, how Guy's Hospital was able to treat its patients without the aid of the pharmacy staff. The pharmacist has a key role to play in the treatment of patients and in some hospitals is a member of the ward team."

Dangers of 'planned' pharmacy

The "appalling manner" in which doctors have been allowed to prevent progress on rural dispensing suggests that any proposals pharmacists make must take heed of the doctor's loss of remuneration, Dr H. Maddock, a member of the Pharmaceutical Society's Council, believes.

Speaking recently to the Aberdare, Methyr and Rhondda Valleys Branch on the future of pharmacy, Dr Maddock put forward the suggestion that a dispensing doctor may only supply medications packaged or prepared from a specified pharmacy in his locality. The prescription would only then be used for the replacement of stocks of medicines and appliances, and forwarded by the pharmacy to the appropriate authority for the recovery of the doctor's and pharmacist's fees. The proposed scheme for improved remuneration of small pharmacies being discussed by the Contractors Committee "would then be invaluable in setting up the new pharmacies required," Dr Maddock added.

Under the reorganisation of the NHS, pharmaceutical officers, "are by definition responsible for all facets of the pharmaceutical service." Dr Maddock asked: "Will their enhanced status and experience then prompt them to broaden their areas of activity?" The general practice pharmacist had, through his accep-

tance of voluntary organisation, shown his willingness to pass on to the consumer the benefit of co-ordinated purchasing power by lower prices. If a technique was acceptable for OTC products "then it must be equally acceptable for medicines" thereby conceivably producing substantial benefits for the taxpayer. Who better to manage such a scheme than regional and area pharmaceutical officers, asked Dr Maddock.

The next obvious step would be the implementation of a "planned pharmaceutical service" — planning had one basic objective, that of utilisation of all available resources to the maximum. It could only be implemented by complete authority over the right to practice pharmacy — some told where to open, others to close and move elsewhere — and the new management concepts in the NHS "provide an ideal vehicle for such dramatic changes."

Turning to the Society, Dr Maddock said it must be prepared to initiate reforms, "even to the extent of changing its function", so that it was better equipped to look after the interests of its members. There would appear to be "a good case" for amalgamating the Society's and the medicines inspectorates within the pharmaceutical division within the Department of Health.

Will chemists support NHS sanctions?

Chemist contractors are being asked this week by the Central NHS Committee whether they would support sanctions, should present negotiations with the Department of Health not produce a satisfactory outcome.

The question comes in a special issue of the committee's new publication, *Action*, which was being posted towards the end of the week. The committee points out that its claim for 7.4p per prescription is considered fully justified and invites contractors to say, on a reply paid form, what sanctions they are prepared to take — full, partial or in selected areas, for example.

In the event of a negotiations breakdown, the committee would seek a concrete mandate to take action — this is purely a "sounding out" said a spokesman for the Committee.

Bogus pharmacist 'stole drugs for export'

Australian Atha Carveles stole large quantities of drugs from pharmacies after getting jobs by posing as a fully-qualified chemist, the Central Criminal Court was told on September 20. Later the drugs were exported to Israel and sold at vastly inflated prices, it was alleged.

Carveles of Edgware Road, Paddington, admitted fraudulently obtaining employment at four London shops in Bethnal Green, Lavender Hill, Brixton and Walworth. He also admitted stealing an unspecified quantity of various drugs from the shops.

Giving him a 12-month sentence suspended for two years Judge Buzzard said he was saved from prison by his age, previous excellent character and "full and frank" confession. Mr Joseph Gosschalk, prosecuting, said Carveles used false names, addresses and qualifications to obtain work as a "holiday relief" chemist last year. Carveles would overorder large quantities of drugs and then vanish with them after a few weeks employment, Mr Gosschalk added.

Mr C. Nicholls, defending, said that Carveles had worked for most of his life as a pharmacy technician. Because he was in "desperate" financial trouble after the loss by theft of £3,000-worth of furniture he decided to pose as a qualified chemist to get good money. Then a criminal receiver, who has since died, put a proposition to him about the theft of drugs. Mr Nicholls said Carveles passed the drugs on to the receiver and was paid about half the value, a total of £800. Later, the drugs were sent to Israel where they commanded a much higher price.



The secretary and four members of the National Association of Pharmaceutical Distributors last week visited ICI Pharmaceuticals Division at Alderley Park, Cheshire. Pictured in the home order unit are (standing left to right) N. H. D. Shipley, Ayrton Saunders & Co Ltd; H. G. Street, Vestric Ltd; W. M. Cox, Herbert Ferryman Ltd; R. A. Dakin, Smith and Hill (Chemists) Ltd; E. R. Leaver, secretary NAPD, and H. D. Officer, home order services supervisor.

Doctor's journal attacks pharmacists on two issues

Articles in last week's *Pulse* attack pharmacists' attitudes to doctor dispensing and sale of OTC medicines.

In "Rural GPs win again", Dr B. D. Morgan-Williams of the rural practices subcommittee of the General Medical Services Committee says that Dr David Owen's recent decision that no change should be made to Regulation 30 (*C&D*, August 17, p 225) means that as long as the above committees resist a change, no change will take place.

"No rural practice subcommittee is likely to cut its own throat by throwing rural patients to the tender mercies of a disorganisation of small commercial ventures which have no intention of providing either a 24-hour service in any area or any sort of service at all in the areas from which they cannot make a profit.

"Now the pharmacists' attitude is to some extent understandable. A pharmacist does not open a chemist's shop for the sake of his own health. He does so as a commercial venture, relying on his dispensing service to act as a magnet to bring money and people into his shop.

"He can then also derive whatever profit he can from the sale of the goods one expects to find in such shops, from rubber hot water bottles to toothbrushes or perfume.

"The pharmacists' efforts to try and achieve what they call a 'solution' to the dispensing problem have been persistent to put it mildly, and some of the tricks they have employed have not been particularly creditable."

Dr Hertzell Creditor, medical editor of *Pulse*, in "A case for self-medication", criticises the Medicines Commission's consultative document which was restrictive about the size of pack of analgesics that could be sold outside of pharmacies.

"The reasoning that this silly prohibition was instituted on grounds of safety, is an evident delusion.

"There is good reason to believe that

the Medicines Commission has responded pathologically to a prohibition lobby. Such significant change, with its profound social and clinical repercussions, may be occurring without exhaustive consideration and certainly without public discussion.

"It is common knowledge that pharmacists as a profession have strongly and publicly and continuously urged the abolition of home remedy purchase other than from a pharmacy.

"Any assertion that their attitude is directed by reasons of safety and the public welfare only, and are without commercial basis, would be estimated as both dishonest and farcical, even by the least suspicious.

"Powerful, impersonal committees, listening to arid pharmacists' pleadings, insensitive to the warmth of custom and humanity, unconscious of the life circumstances of the little old lady who wishes to pop into her local store for a 'few aspirin', may well implement a procedure that will help nobody."

Flu-vaccine withdrawn

Merck, Sharp and Dohme Ltd have stopped the distribution of Adju-Flax vaccine for the rest of the winter season. A nodule in the arm has appeared in some people following vaccination.

A spokesman from the company said that a small number of such incidents were revealed in the clinical trials but the proportion, although not high, is now felt to be too high to continue vaccinations. He said that it is not yet known what causes the reaction but the problem may be related to the vaccine's adjustment.

'Contract' author

Last week's "catalogue of complaints" against the NHS contract was written by Mr W. Rucker, MPS, MIPharmM, of Plymouth. Our apologies to Mr Rucker for the error—W. L. Bray is the trading name for the pharmacy business in which he is joint proprietor.

ASA rejects advertisement complaints

Allegations in a recent issue of *Campaign* that "advertisements for a number of chemists' goods are *prima facie* breaches of the Code of Advertising Practice have not been supported by the Advertising Standards Authority, the paper reported last week. ASA's director and secretary admits that an advertisement for Iron Jelloids was a possible contravention "though only trivially so". However, those for Fynnon Salt and, Ironplan "did not seem to infringe the Code", and there was no evidence that claims for Day-Long and Femfresh were exaggerated. *Campaign* says it intends to submit further evidence and reasoning in support of its allegations.

Among the original complaints, that against Day-Long was contrasted with a Code paragraph stating that antiperspirants should not claim to keep skin dry for a specific period; that against Femfresh ("medically approved and recommended by leading chemists") with the Code ruling that claims of professional support should be substantiated and the extent of support not exaggerated. The Iron Jelloids advertisement criticised suggested that the product could help when "you're just too tired and nervy to see the funny side". The Code says that vitamin and mineral products should not claim that nervousness and lack of energy can be avoided through their consumption.

Stealing drugs 'good living on the side for assistants'

Chemists' assistants can make a good living "on the side" by stealing tablets and selling them on the "black market," according to a professor of forensic medicine.

Professor R. D. Teare, speaking to a recent British Medical Association meeting, said: "Examples can be given of unqualified chemists' assistants who have a key to the shop and turn up early in the morning, ostensibly for the purposes of opening up or sorting the mail, but who can make quite a good living on the side by stealing two or three dozen tablets of, say, Diconal and flogging them to boy-friends."

On barbiturates, Professor Teare said that at the moment "grave consideration" was being given to placing them under the Misuse of Drugs Act control, but as they are used in large numbers "it would be administratively difficult and certainly contrary to public opinion." Half of all suicides were due to barbiturate overdosage, and in 50 per cent of those cases Tuinal was the drug used.

The Lord Lieutenant of Glamorgan, Sir Cenydd Traherne, proclaiming the Queen's Award to Industry to P. Leiner & Sons with Mr Leslie Leiner, chairman, during the presentation ceremony at the company's Treforest plant recently. The Award was gained for the export of encapsulated products—pharmaceuticals, vitamins, cosmetics



Concern over hallucinogen not controlled by MDA

Concern that an amphetamine-like hallucinogen is not controlled by the Misuse of Drugs Act has been expressed by Dr M. Hooper, reader in pharmaceutical chemistry Sunderland Polytechnic.

The drug is known colloquially as "Bromo STP," the initials standing for "serenity, tranquillity and peace." It is well known in the USA, according to Dr Hooper, and has been available in the UK for about two years. Chemically it is related to 2-,5-dimethoxy-4-methylam-

phetamine ("STP") with substitution of the 4-methyl group by bromine; it is also similar to mescaline.

The concern arose following a recent court case in Newcastle in which a youth pleaded guilty to selling what he thought was LSD but turned out on analysis to be "Bromo STP." In theory, says Dr Hooper, if the youth had known the compound was "Bromo STP" he would not have been guilty of possessing a Controlled Drug.

Fines totalling £800 have since been imposed by Newcastle magistrates on three men who admitted being concerned with the sale of the drug.

Poisons Rules: a new class of business—forestry

Changes in the Poisons Rules and Poisons Lists, including the incorporation of a new category of trade or business — forestry — for the sale of certain substances, have been published.

Effective November 1, the changes made by the Poisons (Amendment) (No 2) Rules 1974 (H.M. Stationery Office, SI 1557, 8p) are:

□ Salts of barium: an exemption is made in Group II of Schedule 3 to the Poisons Rules to allow the uncontrolled sale of barium carbonate, when contained in sealed smoke generators containing not more than 25 per cent in weight of barium carbonate;

□ Controlled Drugs: the special controls of lysergide, mescaline, other derivatives of phenethylamine, psilocybin and cannabinol and its derivatives, which are imposed by Rule 18 and Part I of Schedule 13 to the Poisons Rules, are removed as those drugs are now subject to Misuse of Drugs controls; Rule 8 (4) (a) of the Poisons Rules are amended so that those drugs which are controlled under Schedules 2, 3, and 4 to the Misuse of Drugs Regulations 1973 are excepted from the relaxations which the Rule allows, and Rule 8 (4) (b) is amended by replacing the reference to the Dangerous Drugs Act 1965 with a reference to Schedules 2, 3 and 4 to the Misuse of Drugs Regulations 1973;

□ B-12-(3, 5-dimethyl-2-oxocyclohexyl)-2-hydroxyethyl glutarimide (cycloheximide) put in Schedules 1, 5A (preparations for use in forestry), 7 (6) and 8 to the

Poisons Rules, and a new part (c) added to Rule 15 (2) of the Poisons Rules to restrict the sale of the substance to persons engaged in the trade or business of forestry and requires the poison for the purpose of that trade or business;

□ Forestry: Rule 15 (2) (b) and the heading to Part B of Schedule 5 is amended so that all substances named in that Part of the Schedule may be sold also to persons engaged in the trade or business of forestry, and in Part A of the same Schedule changes are in respect of those substances, whose sale is currently restricted to preparations for use in agriculture or horticulture, so that the "form to which sale is restricted" will include preparations for use in forestry;

□ Phenols: an exemption is made in Group II of Schedule 3 to the Poisons Rules to allow the uncontrolled sale of phenols in tar oil distillation fractions not otherwise exempted and containing not more than five per cent of phenols;

□ Schedule 13 of the Poisons Rules is amended by the deletion of: in Part 1, paragraph 5, the words "by the chairman or secretary of an Agricultural Executive Committee or", and, in Part II, the words "[Chairman/Secretary of the . . . Agricultural Executive Committee]", the changes being consequent upon the abolition of such committees in Scotland.

The Poisons List (No. 2) Order 1974 (H.M. Stationery Office, SI 1556, 4p), which also comes into force November 1, adds cycloheximide to Part II of the Poisons List.



How can you squeeze even more out of the toothpaste market?

By stocking the 'Beecham Toothpaste Team.' Why? Because Beecham have ensured that each member of their Team will exactly match the needs of a major sector of the toothpaste market.

Macleans Freshmint – the champion 'whiteness' brand.

Macleans White Fluoride – efficient protection against tooth decay.

And now, **New Aqua-fresh** – for an entirely new standard in breath freshness – plus the additional benefits of whiteness and fluoride protection.

Beecham Toothpastes do not compete with one another but form a single highly competitive team to cover every major market need – exactly. Stock the whole 'Beecham Toothpaste Team' and satisfy all your customers.



**BEECHAM
TOILETRIES**

-sell through faster

BEECHAM PROPRIETARIES, BRENTFORD, MIDDLESEX

How to sell Durex to a man.

**Don't push
your luck.**



Every week in Britain, 2,200 unplanned babies are conceived. You both know that contraception is the responsible decision.

But which method do you choose? And what if you're concerned about side-effects?

Recent independent statistics* prove that, of contraceptive methods where there is no risk of side-effects, none prevent pregnancy more effectively than Durex.

Made to approved standards by the world's leading manufacturer, each Durex protective is electronically tested to guard against any imperfection.

And you won't have the bother of queuing at a clinic or your doctor's to get a prescription. Durex is so safe to use and simple to obtain.

It's really not surprising that more married couples prefer the protective to any other method. 44%* more than the next most popular contraceptive.

Which leaves just one question.

What are you doing tonight?

*Family Planning Survey of England & Wales, H.M.S.O. 1973

durex
Better to be safe
than sorry.

Durex is a registered trademark.

How to sell Durex to a woman.

Can you afford to have a baby yet?

The first few years of a baby's life can set you back well over £1,000! That's even allowing for maternity grants and family allowances.

Contraception allows you to start your family when you can afford it.

But which method do you choose? And what if you're concerned about side-effects?

Recent independent statistics* prove that, of contraceptive methods where there is no risk of side effects, none prevent pregnancy more effectively than Durex.

Made to approved standards by the world's leading manufacturer, each Durex protective is electronically tested to guard against any imperfection.

And you won't have the bother of queueing at a clinic or your doctor's to get a prescription. Durex is so safe to use and simple to obtain.

It's really not surprising that more married couples prefer the protective to any other method.

44%* more than the next most popular contraceptive. Before you start your family, make sure you can afford it.

*Family Planning Survey of England & Wales, M.P.S. O, 1973

durex
Better to be safe than sorry.
Durex is a registered trademark

While Durex is a male contraceptive, it does take two to tango.

Which is why our new advertising campaign stressing the reliability and safety of Durex is addressed not only to couples, but to men and, quite separately to women.

From Reveille and The Sun to Brides and Cosmopolitan,

we're spending £90,000 over three months in twenty-eight different publications, covering 85% of adults. All of which is backed up with four new commercials on Radio Luxembourg.

It's not a great campaign to help you sell Durex. It's two.

durex

News in brief

□ The Home Office has announced that Dr Patrick Mullin, Drug Clinic, Southern General Hospital, Glasgow G51 4TF, has been exempted from the handwriting requirements (Regulation 15) of the Misuse of Drugs Act.

□ The value of safety razor sets and blades sold by UK manufacturers in the second quarter of the year was £11.58m against £11.01m in the same quarter of 1973, according to *Business Monitor* quarterly statistics.

□ A list of synonyms, approved by the Medicines Commission for the heading names of European Pharmacopoeial monographs has been published and is available from the British Pharmacopoeia Commission, 8 Bulstrode Street, London W1M 5FT.

□ A World Health Organisation report estimates the number of infectious tuberculosis cases in the world to be 15-20 million. It stresses the need of increased awareness of the importance of such symptoms as persistent cough, blood-stained sputum and chest pain.

□ The Scottish Home and Health Department has issued a circular amending certain payments made to dispensing doctors because of the reduction in VAT in July. Effective October 1, the amounts of VAT allowance added on to the annual capitation fee for patients on a doctor's dispensing list are reduced and where payment for a prescription is calculated on the drug tariff basis, the new rate of VAT is to be applied to items dispensed on or after October 1.

□ The US Consumer Product Safety Commission has enlarged its poison prevention packaging technical advisory committee. New appointees represent the interests of consumers or industry to reflect a balance of views of the committee and the Commission is said to have sought to achieve racial, regional and professional diversity among the committee members. A community pharmacist is among the new appointments to the 18 man committee (8 consumers and 8 industry representatives) with two Government representatives to be appointed later.

Deaths

Howden: On September 20, Mr William Ernest Howden, MPS, Duns Road, Coldstream, Berwicks, aged 90, Mr Howden qualified in 1912.

Williamson: On September 15, Mr George Murray Williamson MPSNI, Ballygawley, co Tyrone. Mr Williamson served his apprenticeship with J. Macauley Ltd, Irish Street, Downpatrick, and qualified in 1931. For some time he served with R. C. Marshall Ltd, Market Square, Dungannon. About ten years ago he took over a pharmacy at Main Street, Ballygawley, where he was in business up to the time of his death.

Topical reflections

BY XRAYSER

Letters

I think I may say that, taking it all in all, and over the years, I have been a comparatively faithful correspondent. (I hope that that does not sound as though I am boasting.) And over the years that I have corresponded—with all sorts of people—I have never counted the cost, apart from the trifling matter of the price of a postage stamp, which has remorselessly become less and less of a trifle. But my attention was arrested the other day by an advertisement which claimed to have the answer, financially speaking, to what it called the three pound letter. It appeared that to make use of the services of a shorthand typist to cope with your correspondence cost £3 for each letter you dictated.

I cannot recall just how that figure was reached, but there was a special device which enabled corners to be cut and the cost to be reduced, and I was very much impressed. So impressed was I, indeed, that I immediately decided to have photocopies made of the advertisement to send to my many friends in the manufacturing and distributive industries who persistently ignore my inquiries. Why they do so I do not know, unless they are short of the requisite three pounds. I have tried writing courteously. I have sent imploring letters. I have sometimes considered that my approach has been wrong and that something a little more decisive might be called for. That has taken the form of a polite inquiry designed to ascertain if they are still in business.

When it's money. . .

At the moment of writing, I await a £3 reply to a letter dated August 24. But I have not given up hope. Indeed, I know I shall hear from them, for I owe them money. If the secretarial side fails in its task, I feel reasonably certain that "Accounts" will take over at what they consider is the appropriate moment. And I fear that that is the point at which I shall have to renew the inquiries which sparked off the first letter. Eventually, following threats and entreaties on both sides, the matter will be adjusted and the account paid.

And within a month I shall receive another three pounds' worth of threats because Accounts has omitted to credit the cheque to my account in the ledger, and the whole thing will begin again. I shall write courteously pointing out that I have in front of me the cheque which has passed through their bank, and ask for an assurance that the amount has been posted to my account. But now the secretarial side takes over and £3 comes into the reckoning, so no reply comes—no assurance—no apology.

Modern aids

Another advertisement has arrived for an electronic calculator, easy to operate—touch the keys just as you say your problem; add, subtract and divide in seconds. It also has a full floating decimal, but I don't know if that is an asset or a disease. It is a convenient portable size and it can be used anywhere, though I imagine that its use on a busy bus to check the accuracy of the conductor's performance might not be well received.

The striking feature of this "pocketful of miracles"—not my own description—is that it costs £21.25 plus VAT. If you have any difficulty in working that one out, just go along to one of the agents, touch the number and function keys just as you say the problem, and the asking price will be yours in seconds. Then speed home with the month's invoices and add, subtract, multiply and divide to your heart's content. But it won't write three pound letters to anyone.



left.
MM/19
Over 350 cards displayed on a revolving, four sided, gilt wire, counter-top unit, offering the maximum selling with the minimum space.

below.
MM/24
Over 200 cards displayed on a gilt wire, single-sided stand, ready for placing straight on to counter, shelf or wall.

Remember the stands are FREE, you only pay for the goods.

Miss Muffet®

Hair accessories packaged specially for the younger Miss.

A complete range of hair decorations, blister packed on superb cards featuring our irresistible Miss Muffet and her friendly spider.

Miss Muffet hair decorations are available in the above package deals that come complete with FREE counter-top display units.

Replacements for each item are packed one dozen in distinctive Miss Muffet outers.

GET TO KNOW MISS MUFFET – SHE'S GOING TO BE A BIG GIRL SOON!
meet her through your wholesaler now





Introducing Carmolis. What's good for the customer is good for the chemist.

Surprising as it may seem, in the pharmaceutical business a healthy customer can be a good customer.

You see, if your customers come in looking like they've been left outdoors all night, and you recommend them a really effective tonic, the chances are those customers will remember you.

And the next time they've got some minor ailment, they'll probably come and ask your advice again.

We suggest you recommend a product you've never heard of. Carmolis.

Carmolis is a herbal therapy that's made to a 300 year old recipe created by Carmelite monks in Switzerland.

It's effective in the relief of a surprising number of minor ailments. It relieves digestive disturbances and flatulence; it alleviates the symptoms of colds; it relieves the misery of catarrh and soothes sore throats; it freshens the breath and cleans the palate. A pretty bold claim

for a new product, you're probably saying.

Maybe, but we're a fairly cautious lot at Dendron, and we don't usually launch new products unless we're sure about them. As you know, we've had some success with such products as Blisteze, Medijel, DDD and Dentinox and we're quietly confident that Carmolis is going to be just as successful.

So we're asking you to stock Carmolis, recommend it to your customers, and see what happens.

It doesn't take up much shelf space, and there's a healthy profit to be made out of it.

So give Carmolis a try, and we promise you'll feel all the better for it.

Available from Dendron, telephone Watford 29251, or your usual wholesaler.



Dendron Ltd.

94-98 Rickmansworth Road,
Watford, Herts

New products and packs

Oral hygiene

Fluorinse mouthwash

En-de-kay Fluorinse fluoride mouthwash, introduced by Westone Products Ltd, is a solution of 2 per cent sodium fluoride for use in preventive dentistry (100ml, £1.00). The solution may be diluted 1 in 40 (5 drops in 10ml) with water and used daily or 1 in 10 (20 drops in 10ml) and used weekly. One bottle provides 18 months' supply and each pack has a 10ml measure. The solution should not be swallowed but rinsed round the teeth for one minute. It is blackcurrant flavoured and contains thymol.

The product is being promoted to dentists and pharmacists, with an intensive campaign starting in the Manchester area. Dentists nationally are being issued with pre-printed prescription forms for C-Red disclosing tablets, En-de-kay fluoride tablets and Fluorinse (distributors S. S. White Ltd, 51 St Ann's Road, Harrow, Middlesex HA1 1LR).

Cosmetics and toiletries

A conditioning hair colourant

Elida Gibbs are currently introducing to the Tyne Tees television area their latest addition to the Sunsilk range—a conditioning hair colourant, Sunsilk Colour-foam (£0.64). The colourant is semi-permanent, applied to the hair by an aerosol, each can giving two applications. Colour Foam is available in eight shades. The launch will be supported by advertising in the Press and on television in the area.

Elida Gibbs are also introducing a Cream Silk clear rinse to the Cream Silk range of conditioners. This new conditioner is transparent and contains lemon and protein and is suitable for greasy hair. For sale at the end of October, it comes in three sizes — sachet (£0.05), standard bottle (£0.20½), and large bottle (£0.32½) (Elida Gibbs Ltd, PO Box 1DY, Portman Square, London W1).

Bath essences

Two bath essences have been introduced by Gerhardt Pharmaceuticals. They are, Fleur de Lis Herbalis bath essence (£0.49) which has a fragrance of herbs and is purple in colour; and Fleur de Lis pine bath essence (£0.49) which has a pine fragrance and is green in colour. Both products are packed in clear plastic bottles, printed in gold with the Fleur de Lis motif on the front of the pack (Gerhardt Pharmaceuticals Ltd, Thornton Laboratories, Glebe Road, Huntingdon PE18 7DX).

Us add soap and talc

This month sees the launch of two products in the Us range — spray talc (£0.63) and soap (£0.41). The products



are aimed at both man's and woman's markets. The spray talc is packed in 8-oz aerosols with the familiar dome cap which typifies the range. Us soap is individually boxed. Both products come in the three herbal bath fragrances — cool citrus, blue lagoon and sunrise. The launch will be supported by television advertising and there are introductory bonuses available (Johnson Wax Ltd, personal care division, Frimley Green, Camberley, Surrey).

Night treatment cream

Charles of the Ritz have introduced a night treatment cream, Auraseva (£20.00). The cream contains such ingredients as soluble collagen, and an amino acid derivative to keep the skin moist and supple; and natural oils and emollients. It is light and fluffy in texture, quickly absorbed and although recommended for use at night, the cream may be used as a daytime moisturiser under make-up (Charles of the Ritz Ltd, Brook House, Park Lane, London W1Y 4EU).

Kamera Klear powder blusher

Pure cheek powder blusher (£0.44) is the latest product in the Kamera Klear range by Leichener. There are three frosted shades in the range: turn on ivory, a highlighter; turn on rosy, a warm dusky pink; and turn on peachy, a soft, muted peach. The blusher comes in a small black circular compact with a hinged, transparent lid (L. Leichener (London) Ltd, 436 Essex Road, London N1 3PL).

Hair care

Six more brushes

Royal Sweden have introduced six brightly coloured hair brushes. All are a mixture of nylon and natural bristle. They are, paddle, for fine straight hair (£1.46); semi-radial, recommended for short, curly or layered hair (£1.46); twist, for long, curly or layered hair (£1.46); radial, for very



short, curly hair (£1.46); a handbag brush (£0.74); and a men's brush (£1.66) (Jacqueline sales division of Jackel & Co Ltd, Kitty Brewster Estate, Blyth, Northumberland).

With young girls in mind

A new range of hair decorations has been introduced which is designed for the younger market. Called Miss Muffet, the range includes 47 blister-packed items, each with an eye-catching card. The range features hair decorations suitable for both long and short hair, with such novelty ideas as a plastic ponytail holder in a clock design (£0.15), a padded ponytail holder in bunny rabbit design (£0.18), coloured hair grips with animal designs (£0.20) and a nylon ribbon with a lurex design (£0.30). The range comes in display outers holding 12 packs and there are counter display units available (Ravina Ltd, 3 Barton Road, Water Eaton Industrial Estate, Bletchley, Milton Keynes MK2 3HS).

Babycare

Musical potty

A musical potty to help toddlers with toilet training has been invented by Mr Maurice Shaw, Totteridge, North London. When a child uses the potty he hears "How much is that doggy in the window?", "Who's afraid of the big bad wolf?" or "Nick nack paddy wack."

Liquid in the base of the potty completes a battery-operated circuit which starts the tune. Mr Shaw, who believes his invention offers a happier, healthier and much quicker method of toilet training, has been interviewed in the national Press and on BBC radio. The potty has been on mail order (£6.80) but will shortly be available through other outlets (Nursery Pied Piper Co Ltd, PO Box 9, London N20 9EY).

Prescription specialities

VISKEN tablets

Manufacturer Sandoz Products Ltd, PO Box Horsforth No 4, Calverley Lane, Horsforth, Leeds LS18 4RP

Description White, flat, bevel-edged tablet marked "Sandoz" one side, coded LB with breakline on reverse, containing 5mg pindolol base

Indications Essential hypertension, angina pectoris

Contraindications Cardiac failure unless satisfactorily controlled by digitalis, atrio-ventricular block, pronounced bradycardia, obstructive pulmonary disease, metabolic acidosis, prolonged fasting, renal failure, pregnancy. Patients should not undergo anaesthesia with anaesthetics causing myocardial depression, eg chloroform, halothane, cyclopropane, trichloroethylene, ether. Should be withdrawn 24 hours before surgery

Dosage *Hypertension*—1 tablet three times daily. May be increased at weekly intervals to 2 or 3 tablets three times daily.

Angina pectoris—Usually $\frac{1}{2}$ to 1 tablet up to three times daily according to response

Precautions Addition of pindolol to existing diuretic therapy increases the hypertensive effect and combination with other antihypertensives enables reduction in dosage of these agents. Patients with poor cardiac reserve should be stabilised with digitalis. Caution in history of bronchial asthma or recent myocardial infarction. Care in patients with spontaneous hypoglycaemia and diabetics taking insulin or oral hypoglycaemics

Side effects Depression, diarrhoea, insomnia, headaches, sleep disturbance, epigastric pain, fatigue and hypertension have occasionally occurred

Packs 100 tablets (£3.98 trade)

Supply restrictions Recommended on prescription only

Issued October, 1974

Notes A specific adrenergic beta-receptor blocking agent with low cardio-depressant activity at therapeutic dose. It prevents excessive sympathetic drive to the heart, resulting in a fall in heart rate, a decrease in cardiac work and myocardial oxygen consumption. Some intrinsic sympathomimetic activity may prevent reduction of resting sympathetic tone to an undesirably low level

BIGESTON suspension, tablets

Manufacturer Organon Laboratories Ltd, Crown House, London Road, Morden, Surrey SM4 5DZ

Description White peppermint flavoured suspension, each 10ml containing magnesium oxide 320mg, aluminium hydroxide/magnesium carbonate co-dried gel 80mg, simethicone 25mg. White flat spearmint flavoured tablet marked "Bigeston," containing magnesium oxide 340mg, alumi-

nium hydroxide/magnesium carbonate co-dried gel 85mg, simethicone 25mg

Indications Relief of dyspeptic symptoms where antacid/antiflatulent is indicated eg dyspepsia of functional or organic origin, hyperacidity, hiatus hernia, indigestion, oesophagitis, gastritis and symptomatic treatment of peptic ulcer

Dosage *Suspension: Adults* — 10 to 20ml three times daily between meals and at bedtime or as required. *Children, 5-12 years* — 5 to 10ml three times daily between meals and at bedtime. *Under 5 years* — 2.5 to 5ml four times daily.

Tablets: Adults — 1 or 2 chewed or sucked three times daily between meals and at bedtime or as required. *Children, 5-12 years* — 1 chewed or sucked three times daily between meals and at bedtime

Precautions Concurrent use may reduce intestinal absorption of tetracyclines

Packs *Suspension* — Bottles of 300ml, packed 6s (£0.80 each, trade). *Tablets* — Cartons of 30, strip packs 3 x 10 (£0.46 each, trade)

Issued October 1974

PHYLLOCONTIN tablets

Manufacturer Napp Laboratories Ltd, Hill Farm Avenue, Watford, Herts, WD2 7RA

Description Pale yellow tablet containing aminophylline 225mg in a slow-release formulation

Indications Treatment and prophylaxis of bronchospasm associated with asthma, emphysema and chronic bronchitis. Treatment of cardiac asthma and left ventricular or congestive cardiac failure

Dosage *Adults*—1 tablet twice daily, maximum 2 twice daily. For night-long prophylaxis of bronchospasm, 1 tablet on retiring, increasing to 2 as required. Should be swallowed whole

Side effects Risks of side effects associated with aminophylline eg gastric irritation, headache and central nervous stimulation, are diminished

Storage In a cool dry place protected from light

Packs 50 (£0.98, trade) and 250 (£4.50)

Issued October, 1974

NEOGEST tablets

Manufacturer Schering Chemicals Ltd, Pharmaceutical Division, Burgess Hill, Sussex RH15 9NE

Description Orange sugar-coated tablet marked with "A" in hexagon containing dl-norgestrel 75mcg

Indications Oral contraception

Contraindications History, during pregnancy of idiopathic jaundice or severe pruritus; Dubin-Johnson and Rotor syndromes; acute and severe chronic liver diseases; pregnancy; history of thromboembolic disorders

Dosage One daily, starting on first day of menstrual bleeding at time chosen by patient. All subsequent tablets must be taken at this time. Effect may be reduced if tablet delayed more than three hours. Pack follows pack without interruption

Precautions Additional contraceptive precautions must be used for the first 14 days. When changing from other hormonal contraceptives and if a tablet is taken more than three hours late additional precautions should be used for the

next 14 days, and likewise after repeated vomiting or diarrhoea. Increased rates of intestinal bleeding, amenorrhoea, and a few pregnancies have been seen in long-term treatment with barbiturates, hydantoin or rifampicin during oral contraception. Patient should be informed that her menstrual pattern is likely to alter. Should be given to lactating women only if absolutely necessary. Should be stopped four weeks before elective operations and during immobilisation, eg after accidents

Side effects Nausea, vomiting, dizziness, headaches, migraine, depressive moods, disturbances of appetite, allergic reactions, amenorrhoea and changes in pattern of menstrual cycle have been reported

Storage In a cool dry place, shelf life

Packs 35 tablets (£0.49 trade)

Supply restrictions P1, S4B

Issued October 1974

MUCODYNE capsules

Manufacturer Berk Pharmaceuticals Ltd, Station Road, Shalford, Guildford, Surrey GU4 8HE

Description Yellow capsule marked "Mucodyne 375" containing s-carboxymethylcysteine 375mg

Indications etc As for Mucodyne syrup

Dosage *Adults* only—2 capsules three times daily reducing to 1 four times daily when satisfactory response obtained

Packs Securitainers of 100 (£6.81 trade)

Issued October 1974

DIODERM and DIODERM C

Manufacturer Dermal Laboratories Ltd, Tatmore Place, Gosmore, Near Hitchin, Herts SG4 7QR

Description Dioderm—white cream containing hydrocortisone 0.1 per cent. Dioderm C—off white cream containing hydrocortisone 0.1 per cent, clioquinol 1.0 per cent

Indications Inflammatory, pruritic and allergic skin conditions such as atopic and eczematous dermatoses and discoid lupus erythematosus. Dioderm C when lesions are infected or infection is likely

Contraindications Viral or fungal infections; tubercular or syphilitic lesions. Dioderm contraindicated in bacterial infections unless used with appropriate chemotherapy

Method of use Small amount should be rubbed well into lesions twice daily or as directed by physician

Side effects Stinging sensation may be noted occasionally but should soon disappear except in rare cases of sensitivity when treatment should be stopped

Storage In a cool dry place. Shelf life 2 years

Packs 30g tubes (£0.68, trade)

Supply restrictions P1, TSA

Issued October 1974

Change in packaging

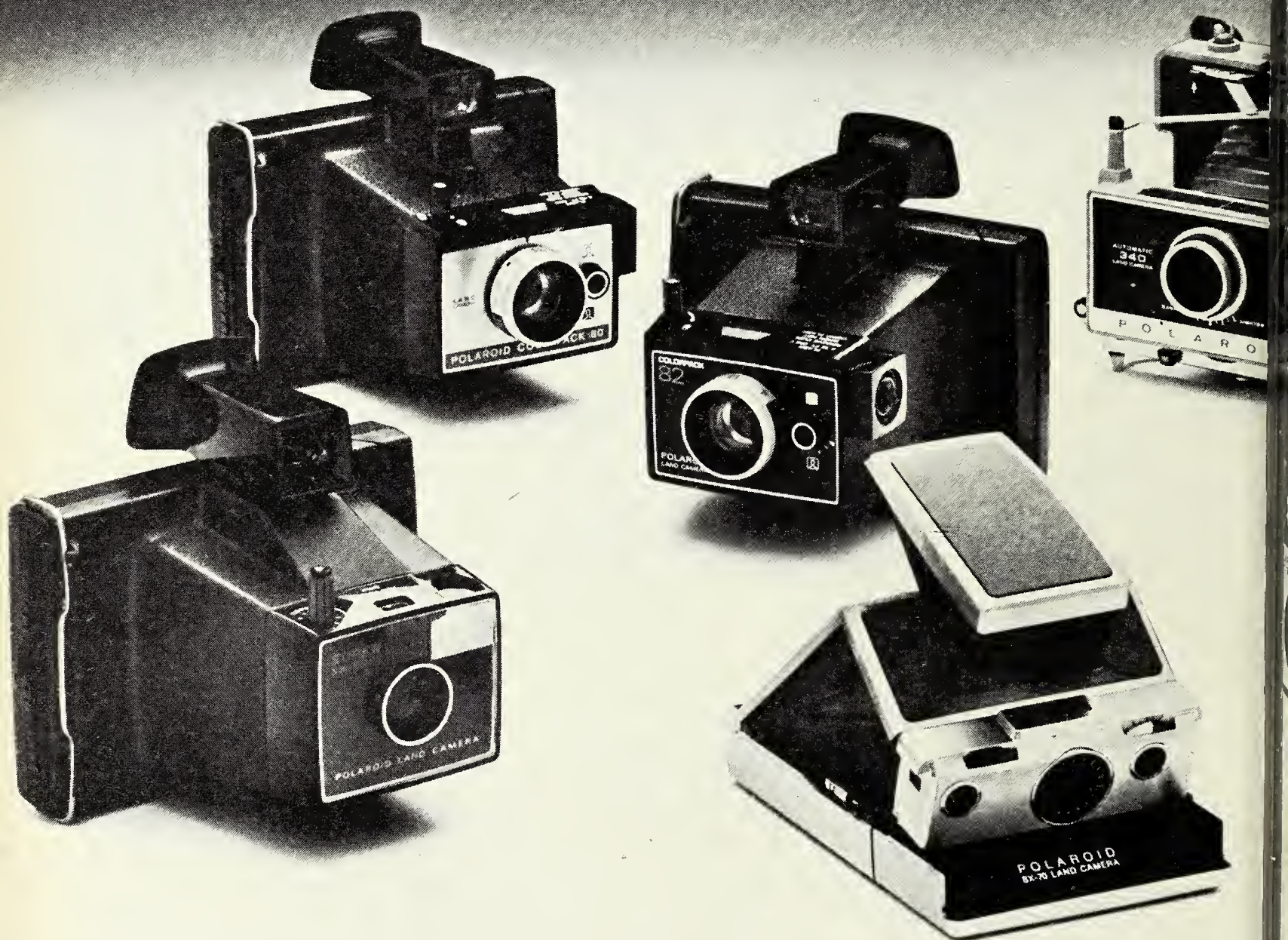
At the request of the Department of Health and Social Security, Ortho Pharmaceutical Ltd, Saunderton, High Wycombe, Bucks, are supplying Lippes Loop in individual packs. The new packs give greater protection to the sterility of the appliance. The trade price has been increased to cover the extra cost of packaging, from £1.12 to £1.22.

***26% of men already use
a hair conditioner
(usually the wife's)**

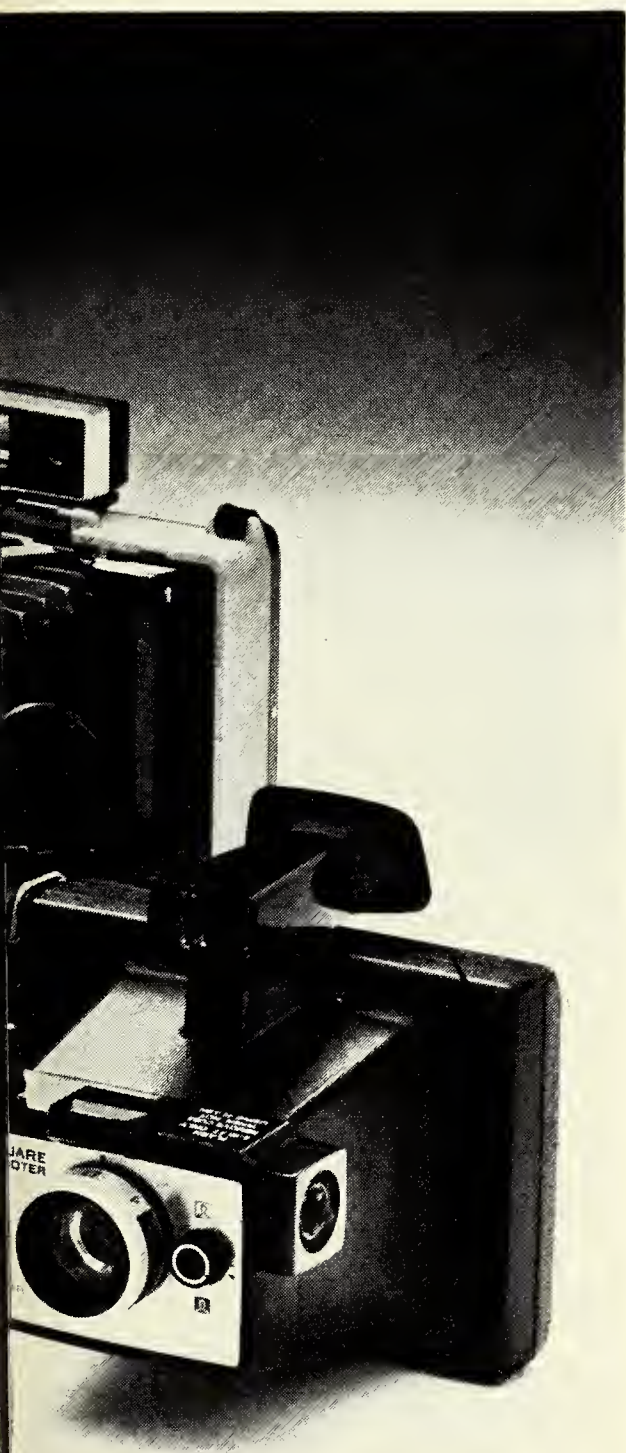


Now they've got their own
National press advertising commences October

How Polaroid turns in for you this



Imagination into profits Christmas.



With Advertising.

We're talking about the kind of imagination that makes the incredible SX-70 so incredible.

In just minutes, this revolutionary system gives you an incomparable colour photograph that develops itself outside the camera. You just focus, press the button and watch it happen.

And, because the SX-70 creates excitement for the whole idea of instant photography, it's sure to increase the demand for other Polaroid instant picture cameras. Like the Square Shooter 2, the lowest priced instant colour camera ever. As well as the popularly priced Super Swinger and Colorpack 80 with their broad family appeal. And our folding pack cameras for more professional uses.

With Cameras.

Watch imagination sell.

Beginning in October, to introduce the SX-70, you'll see the largest campaign we've ever put behind a new product. With world famous actor Peter Ustinov demonstrating the SX-70 in powerful 60 second TV spots.

Plus an 8 page colour insert (something you don't see every day) in the Daily Telegraph Magazine and full colour spreads in the Sunday Times Magazine to launch the SX-70 in the press.

Then from the middle of November up to Christmas, we'll be advertising our other instant picture cameras. With a brand new commercial for Super Swinger that will reach almost 80% of adults, anything up to 7 times each. And whole pages in the colour magazines for Square Shooter 2.

Together with what we're spending to support SX-70, our total advertising expenditure will be more than three times last year's.

What will all this mean for your profits this year? It's almost too good to imagine.



'Polaroid', 'SX-70' and 'Swinger' are trademarks of the Polaroid Corporation, Cambridge, Mass., U.S.A. Polaroid (UK) Ltd., Ashley Road, St. Albans, Herts. Copyright Polaroid Corporation 1974. All Rights Reserved.

Trade News

Cox discontinue chemists' own brand range

Arthur H. Cox & Co Ltd, 93 Lewes Road, Brighton, have discontinued their chemist own brand range. They have decided to "take a more aggressive marketing approach" and produce a wide range of products under their own name.

The packaging has been redesigned and introductory bonuses are available. The new range includes the former chemists' own brand mouth ulcer lozenges, cold discs, cetrimide cream, nasal spray and cough syrups, and the branded Entroquin tablets, Campden fruit and wine preserving tablets and Effer C. The company also supplies Iron-Ox and Juno-Junipah tablets, Mackenzie smelling salts, Noxacor and Wintogeno rheumatic cream. The range of generic tablets continues.

Infectious diseases indicator

Sterling Health gave away over a million "Childhood infectious diseases" indicators in the September 28 issue of *Woman's Realm*. Designed to assist mothers in recognising and coping with minor episodes of childhood infectious illnesses, the indicator also provides a method of keeping an individual and permanent immunisation record — the dates of immunisation, when due and when given, are recorded on the back.

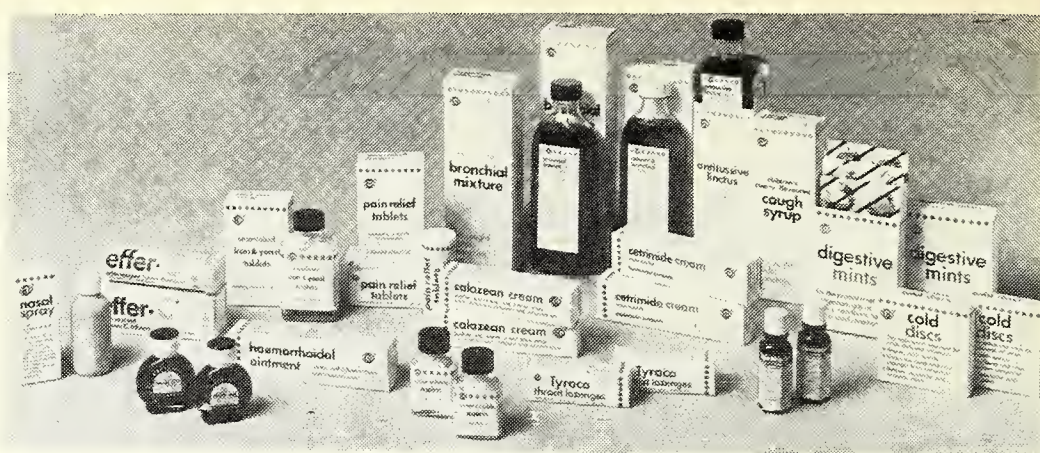
On a detachable card, the indicator also offers adults free samples of Andrews, Milk of Magnesia tablets, Hedex, Hedex Seltzer, Junior Delrosa and Lantex. Sterling Health Products, St Marks Hill, Surbiton, Surrey KT6 4PH, report that their holiday first aid guide — distributed in *Woman & Home* July issue — resulted in 85,000-plus sample redemptions.

Flicker incentive scheme

Personna International UK Ltd, Nicholas House, Nicholas Walk, Maidenhead, Berks SL6 1LD, are running a "Personal touch incentive scheme" exclusive to chemists and their staff, to promote sales of Flicker women's shaver. Incentives will be allocated for each of the eight selling regions and those who recommend and sell the highest number of the products will win a long weekend in Spain, a weekend in a luxury hotel in the UK, or receive a restaurant voucher for a dinner for two. Sales assistants will be supplied with a free Flicker to try. Leaflets giving full details of the scheme and an entry form will be distributed to chemists by the sales force.

SX-70 campaign next week

October 8 is the date of the start of the publicity campaign for the SX-70 camera system by Polaroid (UK) Ltd, Ashley Road, St Albans, Herts. Four different TV commercials, lasting 30 seconds or 60 seconds and featuring Peter Ustinov using the camera, are to be screened on all



networks starting that day. Special eight-page advertising presentations are scheduled for *Sunday Telegraph* and *Sunday Times* colour supplements.

Bio-Strath competition

New Era Laboratories, 39 Wales Farm Road, London W3 6XH, are running a competition offering a portable colour television set and weekend holidays in Switzerland as prizes. Chemists who order 12 bottles of Bio-Strath before October 31 are eligible to enter the competition which is judged upon the best reason for stocking the product. The company's "mystery shopper" will also be calling at various shops around the country to judge window and in-store displays.

Reclassification call for Optimax

Following the recent High Court decision that Optimax powder, as a complete substance, is a drug (*C&D*, July 27, p 112),

Cambrian Chemicals Ltd, Suffolk House, George Street, Croydon CR9 3QL, are approaching the Borderline Substances Committee for reconsideration of the present classification as a "food" for NHS prescribing purposes. (See Letters, p 486).

Vaccine pack changes

Duncan, Flockhart & Co Ltd, Birkbeck Street, London E2 6LA, have revised the single-dose presentations of their vaccines, adsorbed diphtheria and tetanus vaccine (PTAH) and adsorbed tetanus vaccine (PTAH).

The long interval between doses makes it preferable to dispense separately for each dose and consequently the 0.5ml ampoules, formerly issued in packs of two, are now available singly. (Adsorbed Diphtheria and Tetanus Vaccine BP (PTAH) 1 x 0.5ml ampoule £0.18, trade; Adsorbed Tetanus Vaccine BP (PTAH) 1 x 0.5ml ampoule, £0.15.)

Continued on p 480

Chemists' display unit backs Durex campaign

LR Industries are spending over £90,000 in ten weeks advertising their Durex protectives in 28 popular national magazines and newspapers covering 85 per cent of all adults.

The campaign uses four advertisements. "Don't push your luck" features a wry father pushing a pram. "Can you afford to have a baby yet?" pictures the items and costs a new baby involves over its first few years. Rows of babies in cots are headlined "Most accidents happen in the home" and "Not every couple see him as the friendly old stork" is dominated by a stork in flight. The main copy relates the advantages of the protective, which remains the most popular method of contraception.

LR Industries consider this to be the hardest hitting consumer advertising campaign yet for Durex and they are running at the same time four new commercials on Radio Luxembourg.

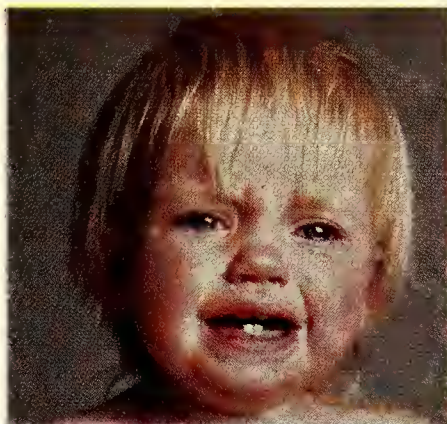
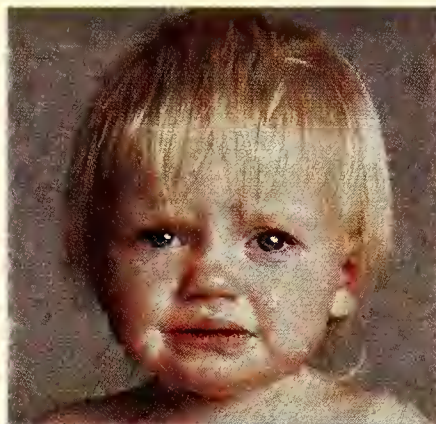
The campaign is being reinforced by the launch of a new counter display unit for chemists only. Of modular design so that it can be built up to whatever shape and size is appropriate, it is formed in clear acrylic, with metal support and clips. Each tray measures just over 5 x 4in and can hold either 11 packs of three or six packs of the increasingly popular 12s. Provision is made in each tray for the attractive display cards which are supplied with the counter unit.



Recent retail audits by LR Industries have shown that total sales of Durex protectives through chemists have increased substantially over past months, but the lion's share of this increase has been through the multiples. The poorer performance of independent outlets is attributed to two main factors — the much higher incidence of product display by the multiples and their related much higher sales of 12 packs.

Currently over 30 per cent of independent chemists display protectives, say LR Industries Ltd, North Circular Road, London E4 80A.

A Three Minute Commercial for Bonjela

½ minute*1 minute**1½ minutes**2 minutes**2½ minutes**3 minutes*

Try this simple test.

Next time a customer walks in with a mouth ulcer or sore gums or a teething baby recommend Bonjela. And watch.

In 75% of cases Bonjela relieves pain in the mouth within 3 minutes(1).

That's why we call it the three minute smile.

That's why more and more people are recommending Bonjela.

Join them. Stock and display Bonjela.

And have a few more smiling customers.

Bonjela.

The 3-minute smile



References: 1. Weg., MH (1965)
Journal New Jersey Dental Society 37, 169.

Full prescribing information is available from: Lloyds Pharmaceuticals Ltd.
A member of Reckitt & Colman Pharmaceutical Division, Hull.

Product Licence No. 0107/5002.

Trade News

Continued from p 478

A teardrop for Jeyes

A new green bottle in a teardrop shape is being used by Jeyes UK Ltd, Brunel Way, Thetford, Norfolk, for Liquid Airwick. The bottle is easy to hold, and has a recessed label area and frosted sides which help to highlight the liquid inside. The shape, which has been successful in the US, reflects the blister pack design of the solid version to give better brand identification.

Elle diary offer

A free pocket diary is the latest offer by Crookes Anestan Ltd, 1 Thane Road West, Nottingham NG2 3AA, on packs of Elle. The diary will be promoted at point of sale with a display outer containing 12 peach blossom and 12 wild rose fragrances. Each can carries a diary tag and a diary may be obtained by sending two of the tags to the makers. The diaries contain an eight-page insert with tips on beauty and personal hygiene. Crookes Anestan are offering bonus terms of 13 for 12 on orders between 2 doz and 4 doz and 14 for 12 on four doz.

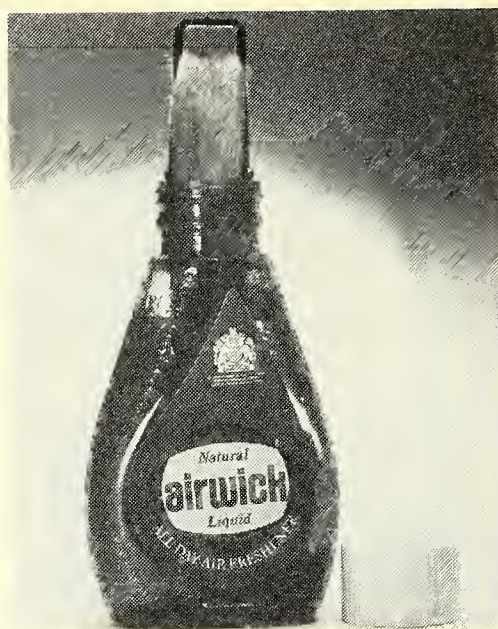
Bengue promote metanium

Bengue & Co Ltd, St Ives House, St Ives Road, Maidenhead, Berks, are mounting a promotional campaign for Metanium baby products.

The campaign will begin with an exhibition stand at the Health Visitors Conference, Llandudno, October 8-10, followed by regular monthly advertising in publications including *Health Visitor* and *Midwife and Health Visitor*. Representatives will be calling on health visitors to explain the advantages of Metanium in the treatment and prevention of nappy rash. A new patient booklet will also be available on request, containing illustrations how the products should be used.

Distinctive packaging for Replica

The Replica range of fragrances consisting of Miss . . . , Madame R, Cabou, Nina and No 5, have been repackaged. They are now individually boxed in



simple but distinctive black and white packaging. Replica 90 Belsize Lane, London NW3, have introduced a dispenser unit which holds five each of the fragrances and a full set of testers.

Shortage halts production

Parke, Davis & Co, Usk Road, Pontypool, Mon NP4 87M, have announced that production of 125ml size Benylin with codeine has been stopped. This has been done to conserve supplies of codeine, of which there is currently an acute world-wide shortage, in order to maintain supplies on 241 dispensing pack of Benylin with codeine.

The company will not accept new orders for the 125ml pack, though all orders currently "in house" will be honoured, but the 241 pack will continue to be available unless the codeine situation becomes much worse. Benylin expectorant and Benylin paediatric are not affected by the company's action, and all sizes continue to be available as normal.

EP formula change

EP tablets have been reformulated to exclude phenacetin. The new formula is paracetamol 300mg, caffeine 50mg and codeine phosphate 8mg and packs are marked "new formula." Daisy tablets, also containing phenacetin, have been discontinued. All stocks of EP tablets containing phenacetin should be returned to Department EP, Eucryl Ltd, Oakley Road, Southampton. Pharmacists should identify their stock by affixing their name and address to one of the packs. Replacement will be at the rate of seven for six, to the nearest six.

Stemetil and Phenergan shortage over

May and Baker Ltd, Dagenham, Essex, regret that, due to a shortage of certain chemical intermediates, there has been a temporary difficulty in meeting the demand for Stemetil and Phenergan tablets.

This shortage has now been overcome and all outstanding orders are being cleared to wholesalers as quickly as possible. May & Baker say that ample stocks are now available and advise pharmacists that there should be no further difficulties in meeting demand.

The medical profession have also been advised that the stocks are normal.

Large packs of Caroline nappies

Caroline nappies have been launched in two "cash and carry" packs. The standard size are available in a carton of 4 x 5 polywrapped packets of 30 nappies (£6.86 trade) and the large size in a carton of 4 x 5 polywrapped packets of 25 nappies (£6.83 trade). International Disposables (UK) Ltd, Berristow Lane, Hilcote, Blackwell, Derby are offering posters and shelf stickers. Distributors are Cuticura Laboratories Ltd, Clivemont Road, Cordwallis Trading Estate, Maidenhead, Berks.

Unichem October offers

Unichem Ltd, Crown House, Morden, Surrey, are offering the following 20 lines on special terms: Andrews liver salts; Beecham's powders, tablets, Hot Lemon; Hedex tablets; Mac lozenges; Milk of Magnesia liquid and tablets; Phensic; Veno's; Kotex New Freedom towels; Camay; Colgate dental cream; Gillette Foamy; Head & Shoulders lotion and cream; Johnson & Johnson shampoo, cotton buds; Right Guard deodorants, anti-perspirant; Chap stick.

Vestric promotions

Vestric Ltd, Chapel Street, Runcorn, Ches WA7 5AP, are promoting the following products nationally during October: Imperial Leather soap; Colgate plus MFP fluoride; Brylcreem; Sunsilk shampoo and hair spray; Twice as Lasting; Cossak hair spray; Contac 400; Procol 8; Endocil range; Alberto shampoo and conditioner; Gerbers baby foods; Simplicity towels; Johnson and Johnson baby soap and oil; Longlex nail polish remover.

on TV next week

Ln — London; M — Midland; Lc — Lancashire; Y — Yorkshire; Sc — Scotland; WW — Wales and West; So — South; NE — North-east; A — Anglia; U — Ulster; We — Westward; B — Border; G — Grampian; E — Eireann; CI — Channel Islands.

Anadin: All areas

Andrex: All areas

Aquafresh: All areas

Belle Color: Ln

Bristows shampoo and conditioner: All areas

Brylcreem Omadine: Sc, G

Cow & Gate baby meals: Ln, M, Lc, Y, So, NE, A

Cow & Gate baby milks: Ln, M, Lc, Y, So, NW, A

Freshmint: All areas

Khadine: All areas

Oil of Ulay: Y, NE

Polaroid SX-70: All areas

Rinstead pastilles: Ln

Savlon baby care products: All except G, E, CI

Sea Jade fragrance: All areas

Three Wishes foam bath: Sc

Three Wishes Soap: So

Us hairspray: Lc

Vosene: All areas



Wilkinson Sword enter sunglass market

Continuing their policy of diversification, Wilkinson Sword are to enter the £22 million sunglass market in 1975. The company have signed an agreement with Foster Grant Inc, manufacturers of the US's leading sunglass brand, to market their sunglass range giving emphasis to the chemist as the major retail outlet.

Announcing the move, Geoffrey Cleaver, marketing manager, Wilkinson Sword, said the sunglass market was still very much a growth area: "Unit sales and sterling value have increased by more than 60 per cent in the past four years."

Wilkinson Sword's research into the market indicated three things: 60 per cent of the sunglasses sold in the UK have polarised lenses; more than 50 per cent retail above £2.50, and the chemist has 51 per cent of these sales. They are confident that their sunglasses will suit these requirements. Seventy-five per cent of the Foster Grant range has polarised lenses; there are five price categories ranging from £2.50 to £4.95, and Wilkinson Sword are able to offer the chemist the widespread distribution facilities and marketing support already established with their shaving products.

Besides polarised lenses the range offers mirrored, gradient mirror, and impact-resistant tempered glass lenses.

The range was test-marketed through

The 14-dozen revolving floor — stand with mirror



chemists this summer, and the most popular styles were selected for the 1975 range. The styles include metal frames in gold and silver, and plastic frames in amber and tortoise, many with "rippled" effect and with arm decoration. There are two additional lines: Auto-flips (£6.05), a range of three styles with polarised lenses and designed for the motorist in which the glasses can be "flipped up" when the sun disappears. These come on one-dozen counter stands, containing four of each style. Sunswingers (£6.29), are suitable for active sportsmen. The glasses have a hinged nose-bridge and adjustable temples to fit closely to the face. There are three lens types — impact resistant tempered glass, mirrored, and polarised, and they are available on a one-dozen counter stand.

The standard range is offered on three point of sale display units — four-dozen

and seven-dozen counter stands, and a 14 dozen floor stand. The display stands arrive factory loaded and ready to display, with each of the sunglasses pre-price marked on a pilfer-proof string tag attached to the glasses. Back-up stock in one-dozen boxes will be obtainable throughout the summer from the sales force and Wilkinson Sword will exchange lines that are not selling, for more popular ones.

To support their entry into the sunglass market, Wilkinson Sword are mounting a national television campaign in April/May, 1975. With test market sales comparable with those of the brand leader without making use of advertising, Wilkinson Sword are confident they will "give the Foster Grant range the strong distribution and market support which will enable it to become number two brand in the UK, in 1975".

Swimcap styles for 1975

Two swimcap collections have been introduced recently. The first, Britmarine by Haffenden-Richborough Ltd, Richborough Works, Sandwich, Kent, covers a wide variety of designs and colours in rubber floral caps, nylon frill caps, simple rubber styles with moulded patterns and motifs, turbans and swimwigs. The overall trend in the collection is for more decorative floral designs with an emphasis on stronger, brighter colours and a greater variety of colour combination in each style. This can be illustrated by the

newly-introduced "Christine" style B713 (£2.50) in the Classic range (see picture). This has a cone-shaped crepe base decorated with large flowers in either a green/blue/pink or yellow/blue/pink colour combination.

The Classic range also has a newer "bouffante" style which is slightly higher than the conventional round shape crown and gives extra room for long hair. An example is Lulu, style B7355 (£1.75). Also popular is the towelling turban style that doubles as a beach cover-up for the hair by removing its rubber base. Seen here is Calypso B5082 (£2.50); and there is Crimplene version, Suzanne B7422 (£2.50).

The Jantzen collection features this year Maroc J4627 (£2.75), a nylon turban, and Granada J423 (£2.75), a ruched cloche

style, both of which have a larger crown shape for longer hair, and a bubble crepe base which stops hair being pulled when putting on and taking the cap off. Shown here are three caps from the Highlight range of rubber moulded caps "highlighted" with rubber flowers. Left is Honey J4168 (£1.15) in yellow, white or blue; centre is Krista J4628 (£1.05) in green, yellow or blue; and right is Sissel J4133 (£1.05) in blue, pink or white. Two new styles have been added in the nylon durapetal range — Miami J7419 (£3.50) and Roma J418 (£3.50).

Both ranges include swimcaps for children and sport caps. The Jantzen range is distributed by Barclay Pharmaceuticals, Lakeside Laboratories, Rawdon, Leeds LS19 7YA.



Style B5082, Calypso by Britmarine



Style B7413, Christine by Britmarine



Left, J 4168, Honey; centre J 4628, Krista; right, J 4133, Sissel, by Jantzen



introduce their new proprietary range

Non C.O.B.



In the most attractive pharmaceutical packaging you've seen for a long time— designed to sell! designed for profit!

Price lists are being mailed to you announcing introductory bonus and normal discounts.

Write or 'phone for Generic Tablets Price List.

ARTHUR H COX & CO LTD
93 LEWES ROAD BRIGHTON
BN2 3QJ TELEPHONE 0273-63084



A new baby milk that is derived from whey

Cow & Gate have introduced a babyfood which is said to go closer to matching human breast milk than any product so far developed.

Cow & Gate Premium babyfood (£0.70) comes as dry powder in a 16oz pack and only requires the addition of water for reconstitution. Taking the average compositions of transitional and mature breast milk as the criteria, the new food has been formulated to provide: protein with a similar amino acid composition; a total fat content with a closely approximated fatty acid pattern; lactose as the sole carbohydrate and representing 55 per cent of the total solids. The food, made from demineralised whey, is said to give a balanced mineral content based on currently accepted standards and vitamins, to the internationally recommended levels, are added.

Protein

The total protein content of cows' milk (3.3 per cent) is higher than that of breast milk (1.5 per cent average) and, more importantly, the casein: soluble protein ratio is 4.5:1 compared with 1:2 in breast milk. This high casein level both produces indigestible curds in the stomach and may also reduce the baby's ability to absorb protein. In the new product, de-mineralised whey is used to provide protein with a casein: soluble protein ratio comparable to breast milk. This also produces a feed which is claimed to have reduced osmolality; a protein mixture with superior biological value to cows' milk protein, due to the higher content of sulphur-containing amino acids, especially cystine; a flocculent curd which is more easily digested by the baby, and may provide increased protein absorption.

Since the new formula is intended for feeding babies from birth onwards, the protein level relates more closely to transitional rather than mature breast milk to provide the higher protein requirement of babies during the first few weeks of life. The formula provides 490mg nitrogen per kg, satisfying the normal requirements for maintenance and growth but giving a lower level of blood urea than in infants fed on cows' milk formulae with a high protein content. The fat is a combination of butterfat and a special blend of pure vegetable oils formulated to provide a fatty acid pattern comparable to that of breast milk which is more easily digested and absorbed. At the same time it reduces the risk of calcium loss associated with excretion of undigested fat. While the total fat content of both cows' milk and breast milk is very similar (3.5 per cent) their chemical composition differs considerably. Cows' milk is richer in long-chain satu-

rated fatty acids and poorer in unsaturated fatty acids than breast milk. In the latter there are fewer long-chain triglycerides and a greater proportion of unsaturated fatty acids. It is the former which babies find difficult to digest and absorb. It is considered that this indigestibility may result in lower weight gain in some babies while high levels of stearate and palmitate reduce absorption of calcium and may thus contribute to the development of neonatal tetany.

Lactose is the only carbohydrate in the new product, and, like breast milk, the formula contains approximately 50 per cent more lactose than cows' milk. Unlike other carbohydrates lactose enhances the absorption of calcium and also possibly magnesium and strontium helping form healthy teeth and bones. It also acts as a catalyst in the growth of intestinal flora which help inhibit putrefactive organisms.

The concentrations of minerals and therefore the feed osmolality have been adjusted to levels similar to breast milk. Coupled with the low protein level this provides a low solute load which can be dealt with by the kidneys of young babies without risk of strain or damage. The reduced levels of sodium and potassium salts provide a margin of safety against hyperosmolar dehydration in such conditions as high environmental temperatures, fevers and diarrhoea. Total levels of calcium and phosphorous salts have been reduced from the high values in cows' milk while the ratio of calcium to phosphorus has been increased from the normal cows' milk level. Clinical studies are said to show that there is little difference in the plasma calcium and phosphorus levels between babies fed on the new formula and those breast fed.

Manufacture

To manufacture the baby milk, a new factory has been built on a 17 acre site adjoining a cheese factory at Wexford, Ireland. A separate quality control laboratory has also been set up for the process. Raw whey from the cheese factory is first pasteurised and then evaporated under vacuum to give a concentrate containing 28 per cent solids. It is then neutralised and clarified.

The whey is then passed through an electrodialysis plant where the excessive minerals are removed. The plant is said to be one of only three in the world, say Cow & Gate and consists of three lines each comprising 600 cell pairs arranged in three stacks. Each line is said to reduce the mineral content of 1,860 gallons of whey concentrate from over 8 per cent to less than 1 per cent in about six hours. The acidity which develops during demineralisation is neutralised with potassium



16oz pack

hydroxide before the liquid is pasteurised and vacuum evaporated to 50 per cent total solids.

In the next stage it is compounded with skimmed milk (concentrated to 40 per cent solids and containing casein, soluble proteins, lactose and some minerals), cream, a blend of pure vegetable oils (formulated to ensure that with the cream, they provide a fatty acid pattern similar to that of breast milk), essential vitamins and minerals to balance those in other ingredients and bring the individual levels to recommended levels. After pasteurisation, the product is homogenised and spray dried to a fine powder with a moisture content below 4 per cent. It is then filled into polythene bags, which, after heat sealing, are inserted into packets with a measuring scoop.

The food, stocks of which are now with wholesalers, has an expiry date of 12-17 weeks, when stored in a cool dry place, and 2-3 weeks after the packet has been opened. The product launch includes advertising in women's magazines and there is to be promotion to the medical and nursing professions. For hospitals, a ready-prepared and sterilised version is available. Cow & Gate do not advise changes of babyfood, however, but the continuation of one brand throughout (Cow & Gate Baby Foods, Guildford, Surrey GU1 4HS).

Bonus offers

Winthrop Laboratories, Winthrop House, Surbiton, Surrey. Lenium sachets, 13 invoiced as 12 for 2-5 boxes; 14 as 12 for 6 boxes and above. Lenium 113g tubes, 7 invoiced as 6 for 6 packs and above. Interlene, 14 invoiced as 12 on packs of 12 or more. Neophryn 15ml spray, 13 invoiced as 12 on 12 or 14 packs; 14 as 12 on 36 packs or above. 12 and 24 tablet packs of Panadeine Co. 13 invoiced as 12 on packs of 24 or 36; 14 as 12 on packs of 48 and above. Actal 24, 48, 84 tablet packs, 13 invoiced as 12 on 1 or 2 boxes; 14 as 12 on 3 boxes and above. On 84 tablet packs, 7 invoiced as 6 on 6 packs and above. Solpadeine 12 tablet pack, 14 invoiced as 12 on orders of 12 or more.

Chemists not seen to be caring about patients

Do chemists care? Yes, but not quite enough, was the opinion of Mr C. C. B. Stevens, president of the Pharmaceutical Society, when he spoke on this theme at the South-east regional conference in Richmond on Sunday.

Mr Stevens said the impression he gained from reading letters in pharmacy journals was that the pharmacist cares a great deal about himself even to the extent of vilifying one branch of the profession against the other, he cares a little about the profession, but publicly he is not seen to care a lot about the patient. It is obvious the pharmacist does care, Mr Stevens went on: Witness the public outcry if a pharmacy closes, or the call for a "chemist's shop" whenever a new housing estate is built, together with the large amount of unpaid work the pharmacist does to ensure the patient receives the best treatment possible. What the pharmacist must do now is to show the public how much he cares, by his actions, particularly on public bodies, and by less selfish interest shown in letter columns.

Unity

Mr Stevens called for unity within the profession in solving the problems in recent letters. On nationalisation of pharmacies he believed the profession should decide which way to go because one day the Council will need to know which direction to take. Many new graduates may prefer to work in a government dispensing service if it was well paid and professional. Mr Stevens suggested. The public have shown they want traditional pharmacies, and there was nothing to be ashamed about in trading if such pharmacies provided good service and advice. Either way, the profession should put up a united front, with public goodwill.

Turning to the NHS contract, Mr Stevens said "you don't have to enter into it if you don't like it" and suggested that if pharmacists were not satisfied with what the nominated negotiators were doing they should offer constructive comments, not just complain.

On professional status, Mr Stevens said pharmacy was now never referred to as anything other than a profession and the status will improve with more graduates.

Finally Mr Stevens saw a solution to the problem of dispensing doctors. In the Republic of Ireland, pharmacists dispense and doctors diagnose and prescribe. In rural areas, a doctor may be over 10 miles away from the nearest pharmacy and must be able to supply drugs. However, these drugs must only be obtained through the nearest nominated pharmacist, not through wholesalers or manufacturers. This system works well and could work in the UK, said Mr Stevens, if re-

muneration of dispensing doctors was not clouded by the issue of increasing pension rights. The idea is being discussed with the British Medical Association.

Mr R. G. Worby, a member of the National Pharmaceutical Union Executive and of the Central NHS (Chemist Contractors) Committee, saw pharmacy "in the middle of a three-pronged attack." Problems arose from the economics of commerce, with the struggle against the supermarket; secondly from economics of the profession ie the NHS contract, which, although voluntary, is a contract with a monopoly employer so the only choice offered is "sign or starve"; and thirdly, from the ethics of the profession.

Viability first

It was easy to say the emphasis should be on the care of the patient and the profession, Mr Worby continued, but unless a profession looked after its members and their viability first they would not be in a position to look after the patient. The pharmacist must fight back at economic forces surrounding him but if he "throws ethics to the wind" he will lose the public's respect and be halfway to the demise of the profession.

Mr Worby said he would like to see a change in the global manner of remuneration in which, as pharmacies closed down, the remainder did more NHS dispensing but were not rewarded for increased productivity. The Committee were constantly fighting with the Department of Health to improve the NHS contract. The most recent claim resulted in a "grossly inadequate" offer which will be re-discussed on October 16.

Contractors have reached a stage in their financial viability where they will have to carry out sanctions against the Department (see p 465).

"This is a sad day for pharmacy," he said, "but if we are to survive at all we are going to have to fight."

Mr Worby suggested that it was to the credit of the retail pharmacist that he had not neglected the patients at all. He was so tied up with fighting for his own survival that he had little time for public relations campaigns which told the public how much he did care.

The work of advising patients and disseminating health education literature was unpaid, leading to a conflict between ethics and commerce—was it best to do what is right unpaid in the hope that the reward will come later? The Committee was hoping that the Department will consider the small pharmacy scheme worth the financial outlay, but if not, the scheme may still have to go ahead because it was for the good of the public. If pharmacists did not provide a comprehensive pharma-

ceutical service, someone else would. Likewise, Mr Worby concluded, if pharmacists are to set themselves up as guardians of the nations' medicines, they must provide a 24-hour service.

Dr D. J. Anderson, district pharmaceutical officer, St Luke's Hospital, Guildford, described the 24-hour service carried out when he worked at the Nottingham General Hospital, a system "deeply concerned with the care of the patients." The resident pharmacist was on call for a week at a time and the scheme was originated as a public relations exercise, with the pharmacist spending some of his leisure time with medical staff and simultaneously providing an on-call service.

Good health is often not taking medicines, suggested Miss Claire Rayner, a medical journalist. A drawback to general practice pharmacy was that it took place in a commercial setting, so that many pharmacists felt they must sell something and were pressurised into doing so by the drug manufacturers. Pharmacists were often too eager to sell vitamins or cold "cures" which did no more good than a glass of whisky, she felt. Miss Rayner wanted to see the pharmacist who gives medical advice totally divorced from the rest of the staff, even if it meant employing a second pharmacist with no financial interest in the business.

She also thought pharmacists could make more use of the written word by issuing leaflets on self care as written advice was less likely to be misconstrued than spoken advice.

The consumer knows little about the areas competing for the pharmacist's attention, said Mr R. Cozens, Consumers' Association. The patient hoped and believed that the pharmacist was a valuable link between the doctor in recognising important factors the doctor had overlooked, such as drug interactions, inadequate dosage instructions: the patient now needed to be told about the care the pharmacist took.

More flexible hours

Mr Cozens called for more flexible, not necessarily longer, opening hours for pharmacies, so that they did not close while the local surgeries were still open.

In the discussion, Mr Stevens said he felt that dispensing in health centres would lose the human touch. Many people going into the community pharmacy were seeking advice rather than medical treatment. The health service structure was bound to be bureaucratic with more medicines given out. Such a system could adversely affect the distribution of pharmaceutical services he said, when pharmacies have to close down and patients have to travel long distances to the centre.

Later he said the Council may eventually have to make a move contrary to the 1921 Jenkin judgment whereby the Society is precluded by law from dealing with matters of remuneration, prices and insurance.

Mr Worby suggested that many materials now distributed by the Department of Health should go solely through pharmacies eg oral contraceptives, baby milks. Such a system would enable pharmacists to get rid of many non-pharmaceutical aspects of their business.

Letters

Doctor dispensing: act now

The response to my letter in your journal has been most heartening (Campaign against doctor dispensing, *C&D*, September 21). There are too many to reply to individually, so perhaps I may use the services of your Letters page once more.

Before flexing our collective muscle I think we should try to reason. Write to your local wholesale houses and point out the waste of money, fuel, labour and time involved in supplying dispensing doctors when one "drop" at your pharmacy would suffice. Point out the ill-feeling caused between the professions by this practice and ask whether or not they value your custom.

If you don't have time to write to them all, just cut out this letter, attach your slip label to it and hand it in an envelope to the van driver of your main wholesaler. *Do it now.*

W. B. Hannon
Bishop Auckland

P.S. I would like to thank all those pharmacists, including multiples, who are not at present affected by doctor dispensing but who have promised support.

Not competent to supply?

My professional ego has today been further deflated when Beecham Animal Health Products have decided that I am not a sufficiently competent person to handle their veterinary multivitamin preparation. This is despite the fact that other companies appear to have the opinion that a pharmacist has this ability.

Accordingly because of their lack of confidence in me I feel that I cannot be entrusted to handle their oral vitamin supplements and teat dip preparations and have accordingly arranged their despatch back to this company.

I urge other pharmacists who are engaged in veterinary practice to bear points like this in mind when they are subjected to these considerable examples of restrictive marketing policies by companies, especially when they want us to handle certain products and not others.

T. A. Stockhill
Managing Director,
Farm Pharmaceutical Supplies Ltd,
Leven, Hull

Support welcomed

I would like to reply to Disaffected's letter (September 21) regarding sales of Wellcome products through non-pharmacy outlets. Unfortunately this is also true of other reputable companies such as Johnson & Johnson, Chesebrough-Ponds, Reckitt & Coleman, Outdoor Girl, etc.

In all fairness, will Disaffected also be giving the representatives of these companies a rough time and not displaying

their products? Might I dare suggest that instead of giving these representatives a rough time Disaffected might discuss ways and means of competing with these swagmen, drapers, etc, because in this day and age the only way to survive is to be competitive.

In closing I would like to thank Wellcome for giving the pharmacist tremendous support over the past years; and this is one pharmacist who will not be giving their representative a rough time for selling to other competitors.

C. J. Rigby
Trevone, Padstow, Cornwall

Optimax classification

As we have had many inquiries from doctors and pharmacists about the prescribing position of our product Optimax (L-tryptophan), for the treatment of depression, may I try to clarify the present situation for your readers.

Optimax is available in tablet and powder form. Optimax tablets have always been prescribable on EC10. Optimax powder, however, has been the subject of legal discussions for many months because

of its chocolate powder content, which resulted in its classification as a food by the Borderline Substances Committee. This in consequence put it outside the National Health prescribing limits of general practitioners.

A recent High Court hearing, however, has adjudged that the National Health Service referees were wrong in considering the product to be a food and not a drug. It was the Court's view that the whole product should be considered rather than its constituent parts when making this food/drug assessment.

In the light of these recent events, we, as the manufacturers, are making further approaches to the Borderline Substances Committee asking them to reconsider and reclassify Optimax powder as a drug, thus making it freely prescribable on an EC10 and removing the cause of the present confusion.

This letter has been sent with the knowledge of the DHSS, and we hope that publication will help minimise the difficulties this situation is presenting.

J. A. Desty
Pharmaceutical manager
Cambrian Chemicals Ltd, Croydon

EEC directives: the present position

At the British Pharmaceutical Conference in Nottingham, Mr S. Durham, a delegate from Sheffield, referred to "the EEC ruling that pharmacists were traders rather than members of a profession", — as if the EEC had reduced pharmacists from being a profession to being shop-keepers. This is misleading.

Pharmacy is one of the 32 liberal professions like doctors, dentists, architects etc. Although there is complete freedom of movement and freedom of establishment for all workers within the EEC, this is not yet possible for any members of the professions. Because pharmacy is a profession, there has first to be agreement on the basis on which there shall be mutual recognition of qualifications and diplomas (directive VI), and co-ordination of educational training (directive VII).

In 1969, before the EEC was enlarged from six to nine, agreement on these two directives VI and VII had been reached, and the package of seven pharmaceutical directives was sent from the Commission to the Council. Before the directives were issued, the EEC was enlarged in 1973 from six to nine, and there was a redistribution of portfolios in the Commission. Pharmacy was made the responsibility of the Commissioner for the Internal Market.

Because the EEC is essentially an economic community, the strongest pressure has been exerted to enable the free movement of manufactured pharmaceutical products. This has not been permitted because manufacturing companies in the UK and some other countries, would not agree to the requirement that a pharmacist must be the "responsible person" in control of manufacture as required by directive II. This in turn prevented agreement on the mutual recognition of diplomas (directive VI), and education (directive VII).

As this produced a complete deadlock,

no further agreement on the package of directives as a whole was possible, so in October 1973 the Commission announced its intention to "break open" the package and try a different approach.

In October 1973, a doctors' hearing in Brussels favoured dropping the rigid quantitative approach in favour of a qualitative educational basis on which diplomas would be mutually recognised. This approach is most likely to be applied to pharmacy also. By now, directives II, VI, and VII were being radically rethought.

Then came the European Parliament's rejection in June 1974 of the two new directives VIII and IX, which called for geographical distribution of pharmacies and the free movement and establishment of pharmacists. As a result, the Commission decided that all the pharmaceutical draft directives must be withdrawn, and a new start made on defining the duties of the "responsible person" in directive II and the educational qualifications that he must have, whether he is a pharmacist or not.

The *Pharmaceutical Journal* report of June 29 1974, carried the headline "EEC committee sees pharmacists as no different from other shop-keepers". This would seem to have confused and misled many into believing that a decision had been reached reducing the status of pharmacists from being professional to being shop-keepers. The report referred to "the already widespread tendency to regard the chemist primarily as a seller of ready-made preparations... subject to the same obligations as other shop-keepers in that he must ensure that the goods he sold were genuine and in good condition."

The report in question was from the European Parliament's Legal Affairs Committee presented on June 13 1974. It rejected the draft directives because they "did not take account of the situation

Continued on p 488

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Health and Social Services Journal, Nov. 10th 1973, 2620.

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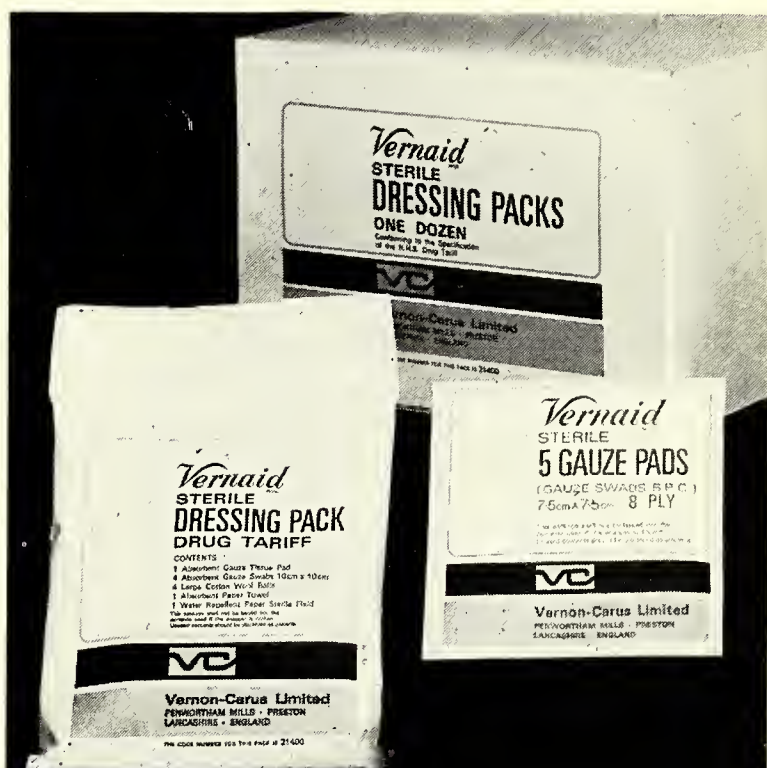
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Letters

Continued from p 486

in the new member states, particularly the UK, where the retail sale of pharmaceuticals is largely conducted by commercial companies with many outlets". (The UK practice incidentally cut right across the earlier directive V which had insisted that premises, equipment and stocks must be owned by a pharmacist.) The Parliamentary report continued, "In the United Kingdom, the concept of the traditional pharmacy is becoming outdated. Pharmacies now sell various products other than pharmaceutical ones in the strict sense of the word — veterinary products, cosmetics, and a series of products such as clothes for babies which could well be sold in other shops as well".

These arguments were used by the Parliamentary Committee against giving a guarantee of a fixed income through controlling distribution of pharmacies, and against the unjustified privileges which the elimination of risk and competition would bring. Undoubtedly, the style of pharmacy as practised in the United Kingdom has been a powerful factor influencing the European Parliament's opposition to special privileges for the less commercial form of pharmacy practised on the Continent.

However, no rulings have yet been made, and no directives on pharmacy issued by the EEC Commission.

W.A.G. Kneale

E.E.C. Liaison Secretary
for the National Pharmaceutical Union
London N14

Society to set the pace?

Lack of job satisfaction makes even reasonably happy proprietor pharmacists scan the "situations vacant" columns for better, or greener fields to make fuller use of hard won knowledge and still receive a reasonable salary. If the ASTMS/Guild claim is successful, and especially their plea for enhanced London weighting, many managers and proprietors who are sick of selling "Care" sprays and other trash to make a living, may well be encouraged to join the ranks of hospital pharmacists.

I wonder however how many will apply for the post in the Society's law department when offered such a pathetic salary for a central London post. It is surely time that our leaders gave really positive guidance to all employers of pharmacists (government, private or public companies; salaried or on a contract) by offering pharmacists posts at salaries of real value.

If our very leaders underrate our worth, how can our negotiators (either retail or hospital) be expected to improve our lot?

A. O. Bond

Glastonbury, Somerset

The starting salary for the Society's law department post was £2,538—£3,024—

Editor.

Pharmaceutical Society of Northern Ireland

Isophane insulin supplies 'being dispatched'

Supplies of isophane insulin are to be dispatched from manufacturers immediately, the Council of the Pharmaceutical Society of Northern Ireland was told in Belfast on September 19.

The insulin would be supplied with a temporary label and temporary packing and manufacturers would keep pharmacists informed of these changes. There was no reason for further shortage of isophane insulin in the immediate future unless unforeseen production problems arose or stockpiling occurred.

Department's letter

These facts emerged from a letter from the Department of Health in reply to the Council's letter about shortages of certain pharmaceutical preparations. The former said that the Department was aware of the present general position and understood manufacturers were experiencing considerable difficulties in meeting demands due to national and international shortages of ingredients and packing materials. The shortage of isophane insulin had been reported by a general practice pharmacist and inquiries showed that there was a major shortage at wholesale level. The main manufacturers of insulin were approached and they confirmed the shortage although one of them had never been out of stock of isophane insulin and still held a small emergency supply.

The president referred to the death of Mr Walter C. Tate who had been a member of the Council for over 30 years and president from 1938-40. The members present stood in silence in sympathy.

The secretary reported that Dr Bacon, who had submitted an apology for absence, would be visiting the University of Ife, Nigeria, in October and would be unable to attend the October meeting. Professor D'Arcy had also apologised for non-attendance as he was representing the Eastern Health and Social Services Board on a study tour of hospitals in France from September 16-27.

Nigerian invitation

An invitation was received to send a representative to the 47th annual conference of the Pharmaceutical Society of Nigeria to be held in the Bagauda Lake Hotel, Kano, from November 28-30. The conference programme includes exhibitions, film shows, business and scientific sessions. It was agreed that the secretary should convey to the Nigerian Society the Council's best wishes for a successful meeting and the fraternal greetings of the Northern Ireland Society.

A letter from the Department of Health said that Regulations are being made to amend the date of operation of the provisions of the Safe Custody Regulations

made under the Misuse of Drugs Act from October 1 to April 1, 1975 (C&D, September 14, p352).

A letter from the representative of a pharmaceutical manufacturing company asked if the Society's lecture hall could be made available early in 1975 for a joint meeting of pharmacists and members of the Northern Ireland branch of the Royal College of General Practitioners. It was agreed to provide the facilities.

It was agreed to hold the annual prize-giving ceremony in the Society's lecture hall on October 16. Mr Alan Hadfield, FPS, is to speak on "The pharmaceutical industry."

The report from the Education Committee, which was adopted, included applications from eight graduates for registration as students. The application of Mr James Anthony Murphy, 16 Glenburn Park, Belfast BT14 6TF, for the restoration of his name to the register of pharmaceutical chemists was granted.

Finances

The honorary treasurer, Mr T. G. Eakin, presented his financial statement for the year ended July 31. Income at £18,716 exceeded expenditure by £2,295. Mr Eakin said there had not been an application for the C. W. Young scholarship last year and the income from investment amounted to £590. He suggested that the Council might look at the annual value of the scholarship (at present £350) with a view to increasing it.

He paid tribute to Mr A. T. Hardy who had given advice on the choice of suitable investments for the C. W. Young scholarship fund. At present the market value of the investments was £6,947 as against a purchase cost of £7,145. This was very creditable in view of the present state of the stock market.

The president, Mr O'Rourke and Mr McIlhagger reported on the British Pharmaceutical Conference in Nottingham and the secretary was introduced to thank the local committee for the excellent arrangements made for Conference visitors.

Pharmacy changes hands

Mr M. L. Cashman, a former president of the Pharmaceutical Society of Ireland, has disposed of his pharmacy at Upper Rathmines Road, Dublin, to Mr Brendan O'Connor, formerly of Parke-Davis & Co. However, he is not severing his connection with pharmacy and will continue to act on the Council of the Society to which he has been attached for the past 18 years.

A native of Brookhill, Beaufort, co Kerry, Mr Cashman qualified in 1939.

Company News

Sterling-Winthrop plan for more paracetamol

Sterling-Winthrop Group Ltd have commenced building a new plant for the production of paracetamol at the 42-acre site of their subsidiary, Hilton-Davis Ltd, at Dudley, Northumberland.

Costing in excess of £2½m the plant is scheduled to come on stream in mid-1975 and have a nominal capacity of 3,000 metric tons a year but with modification 4,500 tons will be possible.

Giving this information on Tuesday, the chairman and managing director of Hilton-Davis said they were already the largest UK supplier of the drug but world demand for paracetamol had lately exceeded production, hence the present shortage. Mr Barany also mentioned that from Tuesday, Hilton-Davis was changing its name to Sterling Organics in order to establish a closer identity with its parent group.

A previous expansion project started at Dudley in 1972 has just been completed at a cost of over £2m. Giving details of this plant, known to the staff as Dudley II, Mr G. R. E. Pope, sales and marketing director, said it would, among other things, enable more efficient manufacture of bulk pharmaceuticals and provide facilities for growth of "custom synthesis" of fine chemicals for the industry as well as the group—business formerly restricted by lack of capacity.

Provision had been made for reactors capable of handling 2,000-3,000-gal. In the other Dudley plant (built in 1969) the size was 500-1,000-gal and at their Fawdon plant, (built in 1957) they were mostly of 300-500-gal capacity.

ICML and Care wholesalers set pattern for consultation

Despite the setback to national promotional programmes during the Spring, due to the fuel crisis — Care national promotion sales are regularly topping £100,000 each month, and the overall Care group sales of the national buying group are steadily increasing and already running in excess of £10m a year.

This was mentioned following a seminar arranged by the group for the wholesalers participating in the Care scheme.

Mr M. Ellerton, management services executive, Independent Chemists Marketing Ltd and recently appointed Mr R. Turner, the Care training officer, outlined the sales and merchandising training courses Care is introducing for wholesaler salesmen commencing on October 8.

Similar seminars are to be arranged regularly between ICML and Care wholesaler executives to keep the wholesaler principals informed on the group's progress and to seek their guidance and agreement to future developments.



Mr P. Godfrey (right), head of Menley & James Laboratories' operations throughout the world, about to sample champagne from one of the silver champagne goblets he handed to Martin Jennings (left), UK sales manager, in London last week. To be known as the president's trophy, the goblet will be awarded for outstanding achievement within the U.S. Brian Mills, vice-president for Europe, pours out the champagne.

Macarthy's Pharmaceuticals call to end uncertainty

Since the publication of the company's report and accounts of Macarthy's Pharmaceuticals Ltd (*C&D*, September 7, p339), current and future problems will be for some time substantially affected by factors largely beyond the company's control, Sir Hugh Linstead, chairman, told the annual meeting last week.

Sir Hugh called for the Government to put an end to uncertainty and provide industry with firm assurances about the immediate future.

Mentioning that stocks were £1.7m in excess of a year previously, Sir Hugh warns that they must affect their liquid position and "energetic steps are being taken to bring down the total to a normal level. We can achieve this by limiting purchases temporarily without in any way affecting sales."

Fisons pharmaceutical sales and profit up

First half 1974 sales by Fisons Ltd pharmaceuticals division increased by £4m over last year's figure to £19.27m, the company announced this week. Research and development amounted to £1.43m (£1.17m last year), and the profit from pharmaceuticals amounted to £3.30m (£2.50m). First half group sales amounted to £104m (£69m) yielding a profit before tax of £8.53m — almost £2m up on 1973.

However, the company say that the rate of growth in pharmaceuticals sales has declined, due principally to some forward purchasing last year and subsequent "de-stocking". Fisons point out that demand for Intal is nearing its peak in the UK, but "excellent" growth prospects remain in other markets which are being increasingly exploited. Overall profit growth has been maintained and should continue despite inflation, especially in the

UK. Total sales of Intal in the US, both by Fisons and Syntex, reached \$10.3m in the first 12 months with Fison's share being \$3.5m.

Briefly

DDD Ltd is the new trading title adopted by DDD Co Ltd.

Hestair Ltd (parent company of Johnsons of Hendon) report first-half profits at £680,000 against £468,000 in same 1973 period.

Glaxo: The Association of Scientific Technical and Managerial Staffs has gained increases of up to 37 per cent for 500 supervisors and engineering technical staff employed by Glaxo Laboratories Ltd.

Change Wares Ltd: Out of turnover up one-third to £9.29m, profits were 18 per cent higher, at £493,000 prt-tax, over the year to June 29. Dividend is raised from 4.51p to 4.66p.

Cussons Group Ltd are "well placed to continue the progress achieved in recent years", states the chairman, Mr S. H. Cussons. A greater proportion of the profits will arise overseas and the policy of expansion in this field will continue, he says.

Laporte Industries (Holdings) Ltd increased their first-half pre-tax profits by 137 per cent to £7.189m compared with £3.031m in the first half of 1973. Sales were £32.105m (against £23.375m). Dividend for year should be increased within the limits allowed, says the chairman, Mr J. L. Harvey.

Appointments

E. H. Butler & Son Ltd have appointed Mr K. Greenhalgh, BA, their chief buyer. **Kimberley-Clark Ltd:** Mr Hugh Bunce until recently area manager in West London and Mr John Nightingale, formerly an area manager in the East Midlands, have been appointed product managers.

LRC International Ltd: Mr F. L. Davis, a deputy chairman and managing director, is to be appointed president of **LRC North America** early next year. Mr M. M. Sellers is to become joint managing director, **LRC International**. Mr J. S. Hurn becomes managing director of **Haffenden-Richborough**; Mr J. N. Forsyth managing director, **LRC Europe**, which is being formed by bringing together the group's Italian, Dutch, German and Austrian subsidiaries.

Wilkinson Sword's personal products division has announced the following reorganisation in their sales management team:— Mr J. Bruce becomes general sales manager; Richard Byrnes, becomes marketing services manager; Keith Watson, who takes national sales manager, chemist division; Roger Henwood, national sales training manager and David Thresh, house accounts manager.

Armour Pharmaceutical Co Ltd: Mr K. W. Fitch has been appointed managing director, Mr W. F. Ticehurst remains chairman of the board, director of Dial Toiletries & Pharmaceuticals (Proprietary) Ltd, Johannesburg, and in addition, assumes overall responsibility for the production and marketing of Armour-Dial International's range of chemicals and toiletries in the UK and Irish Republic.

Market News

CHEMICAL SHORTAGE

London, October 2: Many pharmaceutical chemicals continue in short supply as manufacturers restrict their domestic customers to a percentage of last year's purchases. Exports are often more profitable at the moment especially to those countries where there is no curb on raising prices as in the UK. A few examples of shortages that may be cited are acetic acid, phenobarbitone and sodium thiosulphate and spot material is likely to be at a premium over those mentioned in these columns. Some of the magnesium salts are dearer. An application for higher bromide prices is with the Price Commission. Ascorbic acid prices are now expected to remain unchanged until December.

Among crude drugs hydrastis, cascara, podophyllum and Peru balsam are firmer. Lower are buchu and styrax.

Changes in essential oils includes Chinese peppermint and sassafras and palmarosa, all lower. Bois de rose was firmer.

Pharmaceutical chemicals

Acetic acid: 4-ton lots ex-works, per metric ton, BPC glacial £154.75; 99.5 per cent technical £146.75; 80 per cent grades pure £135.25; technical £126.25.

Alotin: 50-kg lots £12.90 ko.

Atropine: (per kg for 1/2-kg lots) Alkaloid £85.00; methonitrate £95.00; methylbromide £83.50; sulphate £66.50.

Bacitracin zinc: £3.10 per mu.

Bismuth salts: £ per kg.

	under 50-kg	50-kg	250-kg
carbonate	9.18	8.95	8.90
salicylate	7.68	7.45	—
subgallate	8.13	7.90	—
subnitrate	8.33	8.10	8.05

Brucine: Sulphate £25.00 kg.

Caffeine: Anhydrous £3.19 kg in 100-kg lots; citrate £2.09 kg (50-kg lots).

Cantharidin: 10 g lots £0.75 per g.

Chloral hydrate: 50-kg lots £1.00 kg.

Chloramphenicol palmitate: £40.00 per kg.

Citric acid: Spot BP granular hydrous per metric ton for single deliveries from £425 to £554 according to maker. Anhydrous from £456 to £595.

Deltacortisone: £450 per kg.

Dexpanthenol: £10 kg; £8.50 ko.

Digoxin: £2.85 per g.

Ephedrine: Alkaloid £18.30 kg in 25-kg lots; hydrochloride £15.50; sulphate £17.00.

Ferrous fumarate: £1.50 kg for 50-kg lots.

Ferrous gluconate: £1.120 metric ton delivered.

Homatropine: Hydrobromide £56.00 kg; methylbromide £58.00 kg in 1/2-kg lots.

Hyoscine hydrobromide: £375.50 kg.

Hyoscyamine sulphate: 100-g lots £82.00 kg.

Iodides: £ per kg.

	under 50-kg	50-kg	250-kg
Potassium*	2.58	2.45	2.43
Sodium	3.26	3.15	—

*For crystals and granules. Powder plus £0.11 kg. **Isoprenaline:** 1-kg lots, hydrochloride £35.00; sulphate £30.00.

Methylated spirits: In 2,500 bulk gal (and in 20 x 45 gal drums) per bulk gal — IMS 66/00 £0.5553 (£0.5980). Perfumery grade 68/00 £0.5945 (£0.6395). Mineralised 64/00 £0.5670 (£0.6120).

Magnesium carbonate: BP per 1,000 kg heavy £312; light £250.

Magnesium dihydrogen phosphate: £0.8358 kg in 50-kg lots.

Magnesium hydroxide: (metric ton) BPC light £730; 28% paste £310.

Magnesium oxide: BP per 1,000 kg heavy £980; light £730.

Magnesium peroxide: 50-kg lots 23-25 per cent £0.59 kg.

Magnesium sulphate: BP from £63.50 to £79.20 metric ton; exsiccated £157.90 ex works.

Magnesium trisilicate: £450 metric ton in 2 1/2-ton lots.

Methadone hydrochloride: Subject to Misuse of Drugs Regulations £1.33 per 5 g.

Methyl salicylate: Per metric ton in 5-ton lots £610 delivered UK.

Methyltestosterone: £220 kg.

Narcotine: Alkaloid and hydrochloride in 25-kg lots £15 kg.

Neomycin sulphate: £42 kg.

Norethynodrel: £190 kg.

Oestradiol benzoate: £600 per kg.

Opiates: (£ per kg) in 1-kg lots subject to Misuse of Drugs Regulations.

Codeine	From	To
alkaloid	233.50	240.40
hydrochloride	218.50	—
phosphate	178.00	183.40
Diamorphine		
alkaloid	232.50	—
hydrochloride	252.60	—
Ethylmorphine		
hydrochloride	227.00	234.40
Morphine		
alkaloid	256.50	264.70
hydrochloride	210.00	216.10
sulphate	210.00	216.10

Paraffins: (Per gal) liquid BP, £0.989; light liquid BPC 1963, £0.882; technical white oil WA 23, £0.804; WA 21, £0.859 (drums extra). Petroleum jelly soft white grade 54, £175.50 ton; yellow grade 60, £162.00 ton.

PAS sodium: £1.40 kg.

Penicillin: Potassium, sodium or procaine, sterile, £14.50 per 1,000 Mu.

Pentobarbitone: 100-kg lots £5.87 for acid and £6.21 for sodium.

Pethidine hydrochloride: From £13.30 to 14.90 kg as to the maker and quantity. Subject to Misuse of Drugs Regulations.

Phenitone: 25-kg lots £4.24 kg.

Phenobarbitone: 100-kg lots £5.25 per kg; sodium £5.60. Supplies short.

Pholcodine: 1-kg £240.90; 60-kg £218.60 per kg. Subject to Misuse of Drugs Regulations.

Phosphoric acid: BP, sg 1.750, £0.2207 kg in 10-Phthalylsulphathiazole: 50-kg lots £1.60 kg.

Pilocarpine: (1-kg) hydrochloride £96; nitrate £88. drum lots.

Polymyxin B sulphate: £62.50 per 100 mu.

Potassium acid tartrate: BPC from £950 metric ton delivered in bags.

Potassium citrate: Granular £461-£624 per metric ton as to source; powder plus £10 ton.

Potassium hydroxide: Pellets BP 1963 in 50 kg lots, £0.84 kg; sticks £2.90; technical flake.

Potassium phosphate: BPC 1949 in 50 kg lots, granular £0.9316 kg; powder £0.8012.

Progesterone: £120 per kg.

Quinalbarbitone: Sodium and acid £6.75 kg for 25-kg lots.

Quinine: Minimum prices per kg, alkaloid £80.00; bisulphate £65.00; dihydrochloride £79.00; hydrochloride £76.00; sulphate £75.00, all nominal.

Sodium thiosulphate: Photo grade £103 metric ton, delivered. Supplies short.

Streptomycin: £18.00 kg base, dihydrostreptomycin £18.50 kg base.

Tartaric acid: Spanish £1,345 per metric ton.

Testosterone: £200 kg; propionate £230 kg.

Theophylline: Hydrate and anhydrous £3.21 kg in 100-kg lots — ethylenediamine (aminophylline) £3.36 kg (50-kg).

Crude drugs

Balsams (kg) Canada: £18.00, cif. **Copaiba:** BPC £2.85 spot; £2.80 cif. **Peru:** £9.90 spot nominal; £9.75, cif. **Tolu:** £3.80 spot; £3.70 cif.

Benzoins: BPC £67-72.44 cwt spot; £66-£71.00 cif. **Buchu:** Rounds £2.95 spot and cif.

Cascara: £950 metric ton spot.

Cassia: lignea broken £950 metric ton, cif; whole £1,100 duty paid.

Cherry bark: Spot £540 metric ton; £525, cif.

Chillies: Nigerian tuntua £375 ton spot.

Cinnamon: (cif) Seychelles bark £425 ton.

Cloves: (Per ton, cif)—Ceylon £2,700; Madagascar £2,150, Zanzibar £2,450 nominal.

Cochineal: Spot. Peruvian silver-grey £15.00 kg; Tenerife black £18.00 both nominal.

Colocynthis pulp: Spot, £720 metric ton.

Dandelion: Spot nominal. Forward £820 metric ton, cif, Oct-Dec.

Gentian: Root £2.10 kg nominal; £2.00, cif.

Ginger: (ton cif) Cochin £525, Sierra Leone unquoted; Jamaican No. 3 £895. Nigerian split £570 (£600 spot).

Gums: Acacia and tragacanth nominal. Karaya tag £25.50 cwt, cif.

Menthol: Brazilian £21.00 kg spot and afloat. Chinese £27.00 spot £26.00 cif.

Podophyllum: Emodi £520 metric ton, spot; £500; cif.

Styrax: £2.60 kg spot; shipment £2.50, cif.

Essential oils

Bois de rose: Shipment £6.75 kg, cif.

Palmarosa: £10.50 kg, cif.

Peppermint: (kg) Arvensis Brazilian £8.25 spot; £8.50, cif. Chinese £12.00, cif. American piperata from £16.00.

Sassafras: Chinese £3.60 kg; Brazilian £2.30.

The prices given are those obtained by importers or manufacturers for bulk quantities and do not include value added tax. They represent the last quoted or accepted prices as we go to press but it should be noted that in the present state of the markets quotations change frequently.

Essential oil market was upset by 'hoarding'

The great shortage of essential oils that haunted purchasing agents all over the world only a few short months ago has in the final analysis proved to be only a "mini shortage", magnified by overstocking and speculative hoarding, according to Mr E. Bruell, of Polarome Manufacturing Co. Mr Bruell was reading a paper to the International Congress of Essential Oils held in the US recently. The results of this exercise in human folly, he added, were overproduction of some fragrance materials, and many expensive oils were replaced with cheaper products causing reduced consumption.

"Unfortunately, the consequences are additive, and serious. Over-production of natural oils cannot be readily turned off, because many producing countries are involved. All over the world growers are cultivating larger crops of citronella, lemongrass and vertivert oils, for example. Not only have plantings increased, but production facilities have also been expanded. One hapless government built an essential oil plant in the middle of Java, which now stands idle.

"Rising prices of the natural oils tend to hasten their replacement. As an example, petitgrain has been replaced in many formulas because of its five-fold increase in price. Ocotea cymbarum, because of its skyrocketing price, has been replaced

as a raw material for laevodopa."

There should be a common goal — namely to produce perfuming materials abundantly at reasonable and predictable prices, thus permitting "marketers" to use the materials as perfume and flavour components in new compositions they are introducing. "We must always be fully aware that no aromatic is indispensable. Products that price themselves out of the market will become as extinct as the dinosaur."

Mint production

The US virtually the world's supplier of Mitcham type peppermint oil, produce 2,334,000kg, three times the quantity produced in 1948. Production of spearmint was 967,000 kg in 1970, again more than three times the production 22 years earlier. The figures were given by Mr S. R. Manheimer of J. Manheimer Inc, another speaker at the Congress.

The US farmer, he said, had been able to meet the extraordinary increase in demand for several reasons. First, he was fortunate to have substantial quantities of fertile land available and shared in the benefits of the American agricultural revolution which had taken place over the past 30 years — the mechanisation of production and harvest operations, development of specialised fertilisers, in-

secticides, fungicides and herbicides, and the improvements in technology of irrigation etc. In 1940 one US farmer supplied food and fibre for ten of his fellow citizens. By 1970 he was doing the job for 40. By 1970 the manual field labour required to produce an acre of mint had been reduced to the point where labour was only a minor cost. Energy, however, had become a highly significant cost. In 1970 they were producing 65lb per acre, compared with 34lb in 1948. For every ten growers producing mint in 1948 there were only four by 1970, yet these fewer growers produced a crop three times the size of the '48 crop.

"As we face the production of mint and other oils today, we find a vastly different situation. Virtually all US farm crops are in great demand throughout the world, and there is strong competition among the different crops for available land. Mint crops are in the thick of this competition, and obviously the price of mint has to rise so the producers can compete for the land on which to grow it. The question for the future is thus—Will increasing world demand for food to increase the price of mint oils that users will no longer be able to afford them?" Bluntly the answer was 'No'.

The introduction of selective herbicides, such as the uracil compounds, is resulting in significant yield increases. New strains of peppermint and spearmint were raising yield levels and mint scientists believe they have not yet reached the full biological potential in the botanical strains of mint.

Coming events

Monday, October 7

Brighton and Hove Branch Pharmaceutical Society Brighton Polytechnic, at 7.30 pm. Film evening.

Finchley Branch Pharmaceutical Society Postgraduate medical centre, Barnet General Hospital, at 7.30 pm. Dr F. G. Clayton on "Modern antihypertensives".

Harrow Branch, Pharmaceutical Society. Northwick Park Hospital, Watford Road, Harrow, at 7.40 pm. Mr H. V. Foord on "The weather".

Leicester and Leicestershire Branch Pharmaceutical Society Postgraduate medical centre, Royal Infirmary, Leicester, at 8 pm. Postgraduate lecture on "Inflammation—an introduction" by Professor F. Walker, (University of Leicester).

Royal Society of Health Pharmaceutical group 13 Grosvenor Place, London SW1 at 7.30 pm. Mr O. J. Andrla (editor of *Frame*) on "Use of laboratory animals in relation to revolutionary medical discoveries".

Tuesday, October 8

Burnley Branch Pharmaceutical Society Swan and Royal Hotel, Clitheroe, at 7.30 pm. Joint working dinner with Blackburn branch. Speaker, Mr A. Medcalfe.

Cardiff Branch Pharmaceutical Society Park Hotel, Cardiff, at 8 pm. Annual meeting.

Liverpool Branch Pharmaceutical Society Adelphi, Liverpool, at 8 pm. Dr D. R. Bowsher and Dr J. M. Mumford on "Acupuncture".

West Middlesex Chemists Association The Park Hotel, Greenford Avenue, Hanwell, London W7. Inaugural meeting.

Wednesday, October 9

Federation of South-eastern Pharmacists The Manor Barn, Old Town, Bexhill-on-sea, at 7.30 pm. Annual dinner.

South-east England Region Pharmaceutical Society Redhill Medical Centre, Redhill General Hospital, Surrey. One-day refresher course on "Dermatological preparations".

West Metropolitan Branch Pharmaceutical Society Great Western Royal Hotel, Paddington Station, London W1, at 6.45 pm. Mr T. P. Astill deputy secretary, NPU on "The legal pitfalls in pharmacy".

Thursday, October 10

Glasgow and West of Scotland Branch Pharmaceutical Society Architecture Building, University of Strathclyde, at 7.45 pm. Professor W. W. Fletcher on "Evolution in action".

Worthing and West Sussex Branch Pharmaceutical Society Kingsway Hotel, Marine Parade, Worthing, at 8 pm. Dr J. M. Tesh on "Drug interactions".

Saturday, October 12

Portsmouth Past Students Association Centre Hotel, Pembroke Road, Portsmouth, at 7.30 pm. Annual reunion.

Scottish Department, Pharmaceutical Society Station Hotel, Perth, at 8 pm. Dinner and dance. Sunday, conference on "Integration—the prospect and the problems" by Mr R. D. R. Gardner, and "The geography of disease" by Professor G. M. Howe.

Advance Information

British Society for the History of Pharmacy, 17 Bloomsbury Square, London WC1, Sunday November 3, at 2.30 pm. "Pharmacists and philately". Speakers Mr D. F. Lewis (secretary and registrar, Pharmaceutical Society) and Mr G. R. A. Short (formerly manager, flavour laboratory, W. J. Bush & Co. Ltd.)

Chelsea College, University of London, Department of pharmacy, "A foundation course in management", covering economics, behavioural science, organisations and their functions, legal and governmental restraints and the structure of society. Twelve sessions over six Wednesday afternoons and evenings, October 23 to November 27. Fee £20. Details from course organiser, Mr B. W. Burt, Pharmacy department, Chelsea College, Manresa Road, London SW3 6LX. (Course limited to 24 students).

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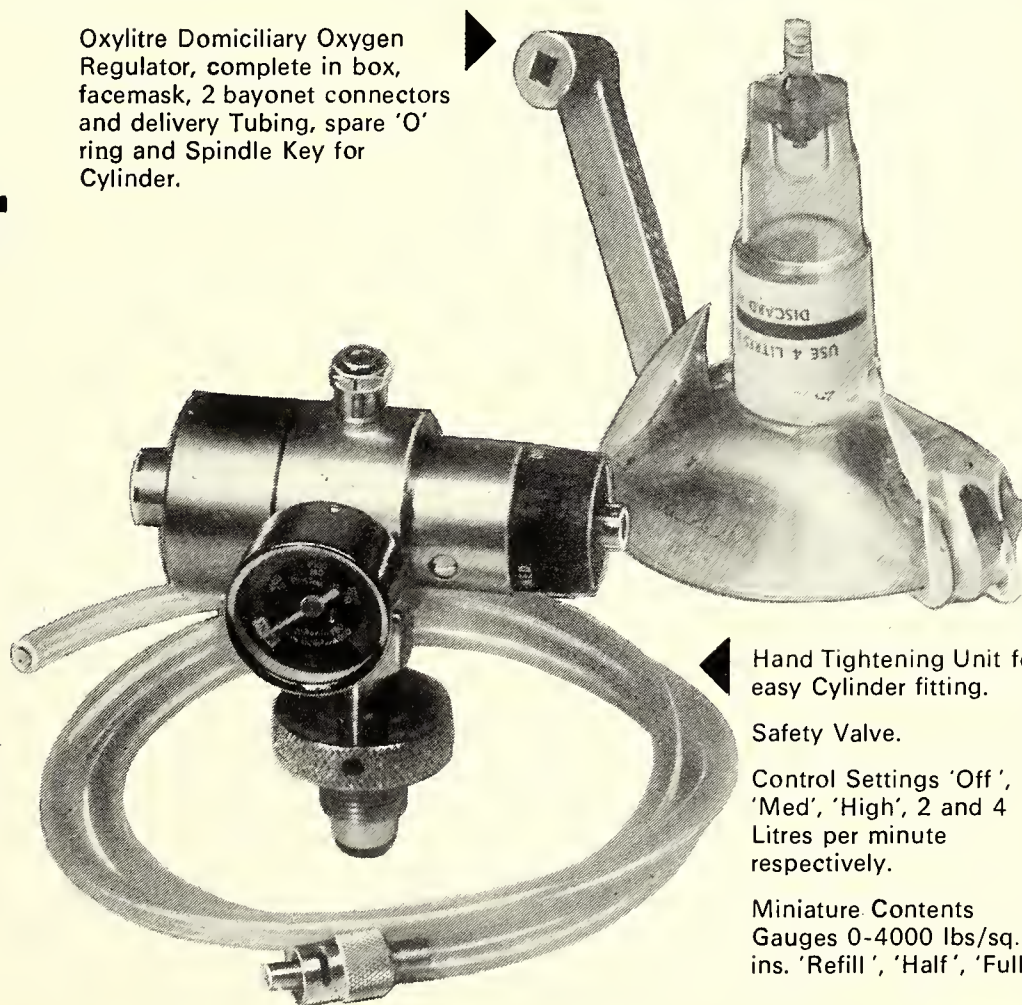
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Nicotinic Acid N-Hexyl Ester
Nicotinic Acid Sodium Salt (sodium nicotinate)
Nicotinic Acid Magnesium Salt (Magnesium nicotinate)
CHEMICAL INTERMEDIATES
CHLORACETIC ACID DIETHYLAMIDE
3,6-DICHLOROPYRIDAZINE (Technical)
2,4,6-TRIiodo-3-AMINO BENZOIC ACID
3,4,5-TRIMETHOXYBENZOIC ACID
NITROUS OXIDE
SUCCINIC ACID



pharmaceuticals

Österreichische Stickstoffwerke AG

Contact Agents

R. D. Harbottle (Mercantile) Ltd

72/76 River Road

Barking, Essex, UK.

Tel: 01-594 4079/9617

Telex: 897934

THOVALINE
the quality
nappy rash
cream

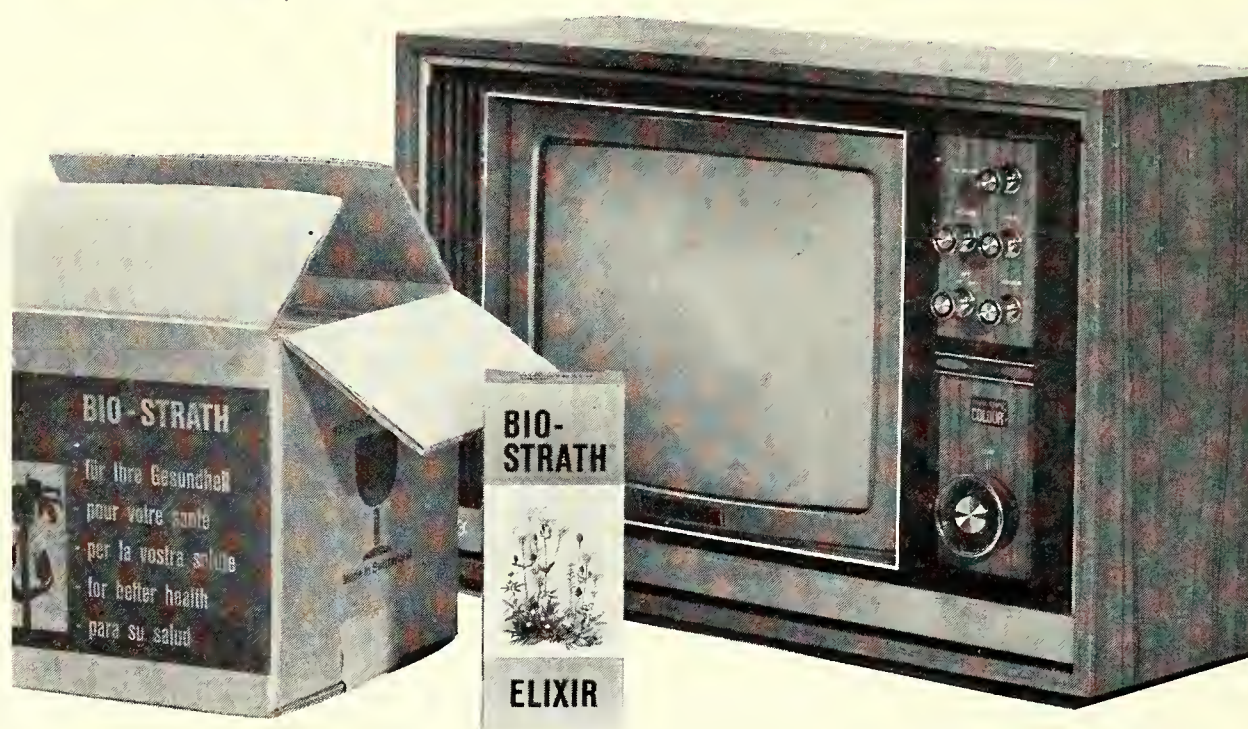


Thovaline is selling more and more each day as mothers discover that Thovaline is on their chemists' shelves.

Order the Thovaline retail pack from your usual wholesaler or from

ILON LABORATORIES (Hamilton) Ltd,
Lorne Street, Hamilton, Scotland.

Buy a box, win a box.



A portable colour T.V. set to be won in the Bio-Strath stockists' competition. Plus lots of Swiss holidays to be won later this year.

Simply stocking Bio-Strath could win you the T.V.

Everyone who orders a dozen bottles of Bio-Strath before 31st October, 1974 is automatically eligible to enter the competition. In addition every dozen is bought at the special price of 12 for 11.

Look out for the mystery shopper.

Another way to win. We'll be sending mystery shoppers around the country, asking for "something to pick them up". Sell them Bio-Strath and one of the holiday prizes could be yours.

Window displays help.

The better your window display, the better your chances. Mystery shoppers will call, looking for the most imaginative, most eye catching window arrangements—winners will receive weekend Swiss holidays.

In-store displays can also win.

The more they dominate, the more likely you are to win a holiday. So look for those prime spots that really put Bio-Strath in the public eye.

Prizes worth having.

The stockist competition prize is a beautiful portable colour T.V. set. Simply using your skill and judgement give your reason for stocking Bio-Strath in the Order Form provided. Then there are lots of mystery shopper weekend holidays. Bio-Strath fly you from London to Zurich for a fabulous weekend in Switzerland. All this for doing what you would normally do anyway—make good profits selling Bio-Strath.

National advertising means everyone wins.

Even if you're not a lucky prize winner, heavy national advertising means that more people will be wanting Bio-Strath, which means a lot more profit for our retailers. SO ORDER BIO-STRATH NOW!

BIO-STRATH Elixir ORDER FORM

Please rush me _____ dozen bottles of Bio-Strath at the special offer of 12 for the price of 11, before 31st October, 1974. This order form enters me in the competition for the prize of a colour television.

The winner will be selected who in the judges' opinion has submitted the most unique selling point. A complete set of rules may be inspected on application.

Complete the following sentence in not more than 15 words:

"It pays to stock Bio-Strath because _____"

Name _____

Address _____

Signature _____

Please deliver through my normal wholesaler.

Name _____

Bio-Strath

Bio-Strath Elixir

The Remarkable Swiss Elixir

New Era Laboratories, 39, Wales Farm Road,
LONDON, W3 6XH.